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**CHILD PROTECTION REFORM
WITH SYSTEM SAFEGUARDS IN CHILD ABUSE AND NEGLECT**



MISSOURI HOUSE OF REPRESENTATIVES

**Report to the Speaker
By the Select Interim Committee
Of the Children, Youth and Families Committee**

**Kaye H. Steinmetz, Chair
1993**

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January 1994

The Honorable Bob Griffin
State Capitol, Room 308
Jefferson City, Missouri 65101

Dear Mr. Speaker:

The undersigned members of your Select Interim Committee of the Children, Youth and Families Committee have completed their study on "Children's Justice With System Safeguards in Child Abuse and Neglect" and submit the attach report.

Kaye H. Steinmetz
Representative Kaye H. Steinmetz

Bill Boucher
Representative Bill Boucher

Cindy Ostmann
Representative Cindy Ostmann

Mary Lou Sallee
Representative Mary Lou Sallee

Mike Schilling
Representative Mike Schilling



MISSOURI HOUSE OF REPRESENTATIVES



KAYE H. STEINMETZ

STATE REPRESENTATIVE - 77TH DISTRICT

January 1994

The Honorable Bob Griffin
State Capitol, Room 308
Jefferson City, Missouri 65101

Dear Mr. Speaker,

Missouri's Child Welfare System is basically a sound one. There are, however, ways to improve that system and provide safeguards for both the child and the accused perpetrator. This report identifies problems and then makes legislative suggestions for solutions.

Your Select Interim Committee of the Children, Youth and Families Committee studying "Children's Justice With System Safeguards in Child Abuse and Neglect" held two public hearings. Testimonies were presented by a variety of people, including child advocates, social workers, parents, grandparents, attorneys and interested individuals.

The work of the committee culminated in the preparation of a House Bill included within this report.

Our report also includes selected materials and testimonies. Ted Wedel of House Research, Mary Regot of Legislative Research, Brett Phipps, legislative intern, and Barbara Mertens, my secretary, are largely responsible for its preparation, and I'm grateful for their assistance and work throughout the study.

I'm grateful, too, for the participation and assistance of Richard Matt, Fred Simmens, Sheila Larkin, and Sally Howard from the Department of Social Services, as well as Nanci Bobrow representing DOSS's Task Force on Children's Justice.

Finally, I appreciate the work of committee members. They continue to demonstrate their commitment and concern.

Thank you for the opportunity to serve Missouri's children and youth.

Kindest personal regards,

KAYE H. STEINMETZ
State Representative, District 77

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FOREWORD

The work of an Interim Committee in 1991 was not completed and their recommendations were never enacted into law. Consequently, problems within the Child Abuse and Neglect System continued to grow.

In August of 1993, Speaker Griffin called for another comprehensive study of policies and procedures involved in the reporting and investigation of child abuse and neglect. The mission was to restructure the current system in order to access more children and their families into preservation services, get immediate protection for severely abused kids, and provide safeguards within the system to both victims and accused perpetrators.

Members include: Representatives Kaye H. Steinmetz (Chair), Bill Boucher, Cindy Ostmann, Mary Lou Sallee and Mike Schilling. An organizational/informational meeting was held in Jefferson City on October 19th. Public hearings were held in Jefferson City on November 3rd and 10th. A work session was held in Jefferson City on November 29th.

A Statewide Task Force on Children's Justice, appointed by the Director of the Department of Social Services, worked both independently and cooperatively with the Interim Committee. They made specific recommendations that were subsequently considered by the Committee and are included in the legislation being proposed.

While some witnesses maintained that the system is too intrusive, others felt it does not go far enough in protecting the children most in need of services. The Committee found The Child Abuse and Neglect System is basically sound...but it can also be vastly improved. The protection of children from abuse and neglect, by means of treatment to the entire family within their own home, must be emphasized; and any changes to the child welfare system must reflect a child-centered, family-focused approach.

Informational materials and the findings of the Committee are provided within this report.

EXECUTIVE SUMMARY

Child abuse destroys children and harms society. Ninety percent of violent criminals were either abused as children or witnessed abuse.

The Children, Youth and Families Interim Committee on "Children's Justice With System Safeguards in Child Abuse and Neglect" recommends three approaches to child abuse and neglect. They are: providing needed services to families instead of punishing them; protecting all children; and streamlining the appeals process.

PROVIDING SERVICES TO FAMILIES IN NEED

Often the emphasis of the system is on investigating families instead of providing services for them. This puts the Division of Family Services in an adversarial role against families and detracts from their primary purpose--to help families in need. Investigations are often completed without attention to the stress that is present within a family. Once abuse or neglect is substantiated, families wait as long as four months before receiving services.

In order to better address this problem, the Committee cautiously recommends that the Division of Family Services establish and subsequently evaluate a child protection system in at least five areas of the state. Under the new child protection system, a report of child abuse and neglect would be screened to determine whether an investigation is needed or a family assessment approach could be used. This approach includes an assessment of risk, and an identification of the need for services.

PROTECT ALL CHILDREN

Many of Missouri's most vicious and predatory child abusers are not listed in the Central Registry. Pedophiles, for example, are rarely listed in the registry because they usually do not have "care, custody and control" of the children they assault. All children are harmed when there is abuse. The requirement that there must be care, custody, and control of the child by the perpetrator in order for an incident to be investigated by the Division of Family Services must be removed.

In addition, all children should have the right to adequate medical care no matter what the religious beliefs of their parents might be. Any report of possible medical neglect should receive the attention of the Division of Family Services.

STREAMLINED APPEALS

Currently, an alleged perpetrator can be involved in an appeal process in both the court and administrative levels at the same time. The current procedure is inefficient, costly and extremely confusing. As a result, the Committee recommends the statutory establishment of a child abuse and neglect review board to provide an independent review for child abuse and neglect determinations.

CHILD WELFARE REFORM

INTRODUCTION

There is rightful concern about the welfare and protection of Missouri's children. There is also rightful concern about the large number of Missouri families needing help within their own home. Since 1980 the number of children alleged to be victims of child abuse and neglect has increased. The percentage of substantiated reports, however, have declined. There may be good reasons. Lack of funding; insufficient staff; inadequate training; care, custody and control uncertainties; and DFS policies and procedures are some of the issues which should be considered.

In 1980, the Division of Family Services received 60,274 reports of possible child abuse or neglect. By 1992, that number had risen to 79,485. This increase means that the child welfare system is interacting with a growing number of Missouri's families. There were 9,790 substantiated cases in 1989 and 10,909 in 1992.

With the increasing number of families who come in contact with the child welfare system, there has also been an increase in complaints that the child welfare system too often unnecessarily interferes in parental decision-making. Conversely, many child welfare professionals and child advocates continue to believe that children and families needing help are being screened out by the system and their needs go unanswered.

The child protection system is at a crossroads. At this crossroad, the law must protect and facilitate the mending of families.

CHILD PROTECTION SYSTEM PILOT PROJECTS

The primary focus of the Child Protection System should be the preservation of families, and to "heal" their problems and keep them together. We must provide them with necessary in-home services. The emphasis of the current system, however, has often been on investigating families instead of providing services for them. This has put the Division of Family Services into an adversarial role and detracts them from helping families in need. Investigations are often completed without attention to the stress that is present within a family. The finding of "reason to suspect" may be stigmatizing and yet necessary to access family preservation services. Once abuse or neglect is substantiated, families may wait several months before receiving services. Thorough investigations are necessary in the most serious cases (especially if prosecution is to take place) but not needed with such "elaborated" methods when the real problem appears to be dysfunction within the family.

In the context of balancing the need to provide services with the need to protect children, a "new system" is proposed. This redesigned system is loosely based on the work of the Florida Department of Health and Rehabilitative Services and it uses five components that: 1. Build on family strengths; 2. Assist parents in providing a safe environment for their children; 3. Strengthen family functioning; 4. Minimize disruption on family life; and 5. Promote self-sufficiency. However, any proposal must start with the assumption that safety of families is the most important concern and

redesigning a system should not happen if it does not ensure safety. Furthermore, without adequate staff and funds, system failures will become an increasingly serious threat.

The new proposal has been labeled the "Redesign of the Child Protective System." It has a two-pronged approach, whereby more serious calls would be handled by immediate and comprehensive investigations, and less serious familial reports would be handled by a "family assessment". (See Appendix A.) When a call comes to the hotline, the Division will forward the report to the appropriate division staff who will, based on protocols, determine whether an investigation is needed or the family assessment and services approach can be used. If abuse is confirmed in the investigative process, these records are kept in a Central Registry. Under the family assessment approach, "problems" in the family are identified and services are offered, but it is not recorded as abuse. If a family refuses services, they will be referred to the juvenile officer who can recommend that they be mandated. The court can then make the final determination.

The Division of Family Services will establish and subsequently evaluate a child protection system in at least five pilot areas of the state. The evaluation is to be presented to the General Assembly by January 1, 1997.

PROTECTING CHILDREN

In 1992, the hotline received 49,286 reports of alleged abuse or neglect. These calls were referred to the county DFS office for investigation. An additional 45,000 calls were received which did not meet the statutory definition of child abuse or neglect. It is important to note that the statutory definition of abuse or neglect requires "care, custody and control" by the alleged perpetrator. This requirement has long been a concern of the many advocates for children. Abuse by a stranger is as equally damaging to a child as is abuse by a parent. Furthermore, many of Missouri's most vicious and predatory child abusers are not listed in the Central Registry. Pedophiles, for example, are rarely listed because they seldom have care, custody and control of the children they assault. That requirement should be changed.

There is also concern with the "Religious Exemption" for any medical neglect reports. Serious cases have occurred without state intervention. One case was the death of Aaron Witte of St. Charles. He died of ketoacidosis, a complication of untreated diabetes. His parents, who are Christian Scientists, had a Christian Science practitioner pray with them when Aaron became ill and they did not seek medical help. The case was ruled a homicide by the medical examiner but because DFS did not investigate, the case could not be criminally prosecuted.

The religious exemption fails to ensure that all children are protected. Section 210.115.3 of Missouri law reads, in part:

"[A]ny child who does not receive specified medical treatment by reason of the legitimate practice of the religious belief of the child's parents, guardian, or others legally responsible for the child,...shall not be considered to be an abused or neglected child; however, such an exception shall not preclude a court from ordering that medical services be provided to the child when his health requires it."

The latter part of this section seems to refer to Section 210.166 which allows "any interested person to bring an action...alleging that the child is suffering from medical neglect," thereby allowing the court to order medical care. However, these provisions do not ensure the safety of all children. First, the petition filed by the interested party must allege medical neglect. Section 210.115, however, says that denial of medical treatment based on the parents' religious beliefs is not neglect. Second, it is almost impossible for these cases to be reported because the law says the denial of medical treatment on religious grounds is not abuse or neglect. That means a mandatory report does not occur because there must be "reasonable cause to suspect that a child has been or may be subjected to abuse or neglect." (Section 210.115)

Since the report is not investigated by DFS, there is no way for the courts to consider the need for medical treatment. All children should have the right to adequate medical care no matter what might be the religious beliefs of the parents.

STREAMLINED APPEALS

The current process for reconsideration of substantiated abuse allows an accused perpetrator to request an administrative review and a judicial appeal concurrently. The administrative review involves an initial review at the county level. If the decision is upheld, a further review can be requested from a Child Abuse and Neglect Review Board. That Board is not established by statute, and the final decision to uphold or revise the Review Board's recommendation is made by the Department Director. The judicial appeal is conducted by the circuit court in the county where the individual resides. If the judge upholds the division's finding, the individual can request a review by a second judge, but no appeal beyond the circuit court is allowed. Currently, an alleged perpetrator can be involved in appeals at the same time at both the court and administrative levels.

The current procedure is inefficient, costly and extremely confusing. The Board's existence is even uncertain because it is not statutorily required. A guaranteed and orderly process is needed so an independent review for child abuse and neglect determinations can be requested by an alleged perpetrator.

CONCERNS ABOUT THE SYSTEM

In the past few years there have been a number of attempts to weaken the child abuse and neglect system. These attempts have often distorted facts and figures in an attempt to make the system look inefficient and self-serving.

There have also been criticisms that child abuse records are too easily available to the general public. These records, however, are important for law enforcement, DFS, and the Child Fatality Review Teams in identifying patterns of abuse or neglect. Information is only released after an investigation has been completed and a determination made. Unsubstantiated reports are kept for five years (unless the alleged perpetrator receives a court order allowing expungement after one year), but these are only accessible to law enforcement and Child Fatality Review panels.

Other criticisms have been about anonymous calls, based upon an assumption that they are primarily "harassment" calls. In true fact, only about 15% of all reports are anonymous. In 1992, only 5,976 of the 51,332 calls were from anonymous reporters, and over 1,200 children were identified as having been abused or neglected.

There are some concerns about the system that are justified. First, the system does not have adequate resources. It does not have sufficient flexibility, along with resources, to ensure that interventions by DFS are appropriately targeted and consistently delivered in a fashion that both protects children and improves family functioning. Second, there is too little training of child welfare professionals on the dynamics of working with people of color and

ethnic minorities. Many of these professionals come from backgrounds which are significantly different than the families they serve.

CONCLUSION

Children are the destiny of our state and we must have adequate laws to protect them. Many believe the system does not go far enough to protect children and families while others believe it goes too far. Any changes to the child welfare system must adequately protect children in danger while also providing needed services to dysfunctional children and families.

SELECTED QUOTES FOR TESTIMONIES

"Are Missouri's children safe from abuse and neglect? I wish the answer could be yes, but unfortunately the answer is that they are at greater risk than ever. We, as a nation, tolerate all kinds of violence...Approximately half of the abused children are 6 years or less at the time of the hotline report...Child abuse reports maintain that over 2.6 million children are abused annually."...**Lucia Erikson-Kincheloe**, Missouri Chapter, National Committee to Prevent Child Abuse, Jefferson City

"Missouri's current system of Child Protective Services is in trouble. The emphasis on investigation and making a case against the abusive caretaker pits the Division of Family Services in an adversarial role against families. Investigations are completed quickly, but without attention to the family's ongoing stress...Some in Missouri would dismantle our child abuse and neglect reporting system completely, arguing that the state has no business interfering with family "discipline." Citizens for Missouri's Children takes a different approach. We believe that there is an appropriate role for DFS as a family-serving agency, but that the current investigative emphasis makes the fulfillment of this role difficult."...**Melissa Hensley**, Citizens For Missouri's Children, St. Louis

"Families in Missouri are faced with major stresses and pressures both from within and outside the family system...Keeping children safe from abuse and neglect is one of the most vital functions of our state's government...The Task Force recommends that the system through which the state responds to indications of possible abuse or neglect be reviewed periodically to assure that the state is discharging effectively its crucial responsibilities...The Task Force supports a redesign of the current system."...**Nanci Bobrow**, Co-Chair, Task Force on Children's Justice, St. Louis

"As a former Christian Scientist and as a parent, I know that these religious exemptions do no positive good for Christian Scientists or their children."...**Laura Franklin**, CHILD, Inc., Ballwin

"Children born in this country are citizens but they have no rights. They are repeatedly overlooked in too many cases. Some parents view them as possessions, rather than as people who have a right to support and appropriate upbringing. Their rights are overlooked in favor of the parents."...**Patty Koehler**, Missouri Advocates For Children's Rights, Wheatland

"All too often it seems children are helped with the immediate threat of abuse or neglect, but never receive counseling and services in the home. They grow up to parent their children just as they were parented, so the cycle continues. These children always believe the abuse was their fault. Many nurses and social workers realize that they have worked on abuse and neglect issues with three generations of the same family. In this 16th year for me, I am dealing with the children of the students I first worked with."...**Mary Wright, R.N.,** Missouri Association of School Nurses, Jefferson City

"Involve grandparents. Give them first preference when the judge orders custody arrangements by the state."...**Shirley Krueger,** Lebanon

"The state government system is the most broken of all because it has consistently received lower funding and commitment priorities. We would rather preserve the river otter, pave a road, or increase a teacher's salary...Children who are in violent homes, those who have been abused or neglected, and children with severe behavioral problems should begin in the system with the services needed at the moment, then progress to other services as they become appropriate. If there is the appropriate screening and diagnosis, some children will have, as their treatment of preference, intensive out-of-home treatment. This will happen early when the prognosis for stabilizing them is excellent, not ten years later when all else has failed."...**Richard Dunn, Missouri Child Care Association, St. Louis**

"There is no such thing as a 'throw away child.'"...**Robert Sheahan, Children's Home Society of Missouri, St. Louis**

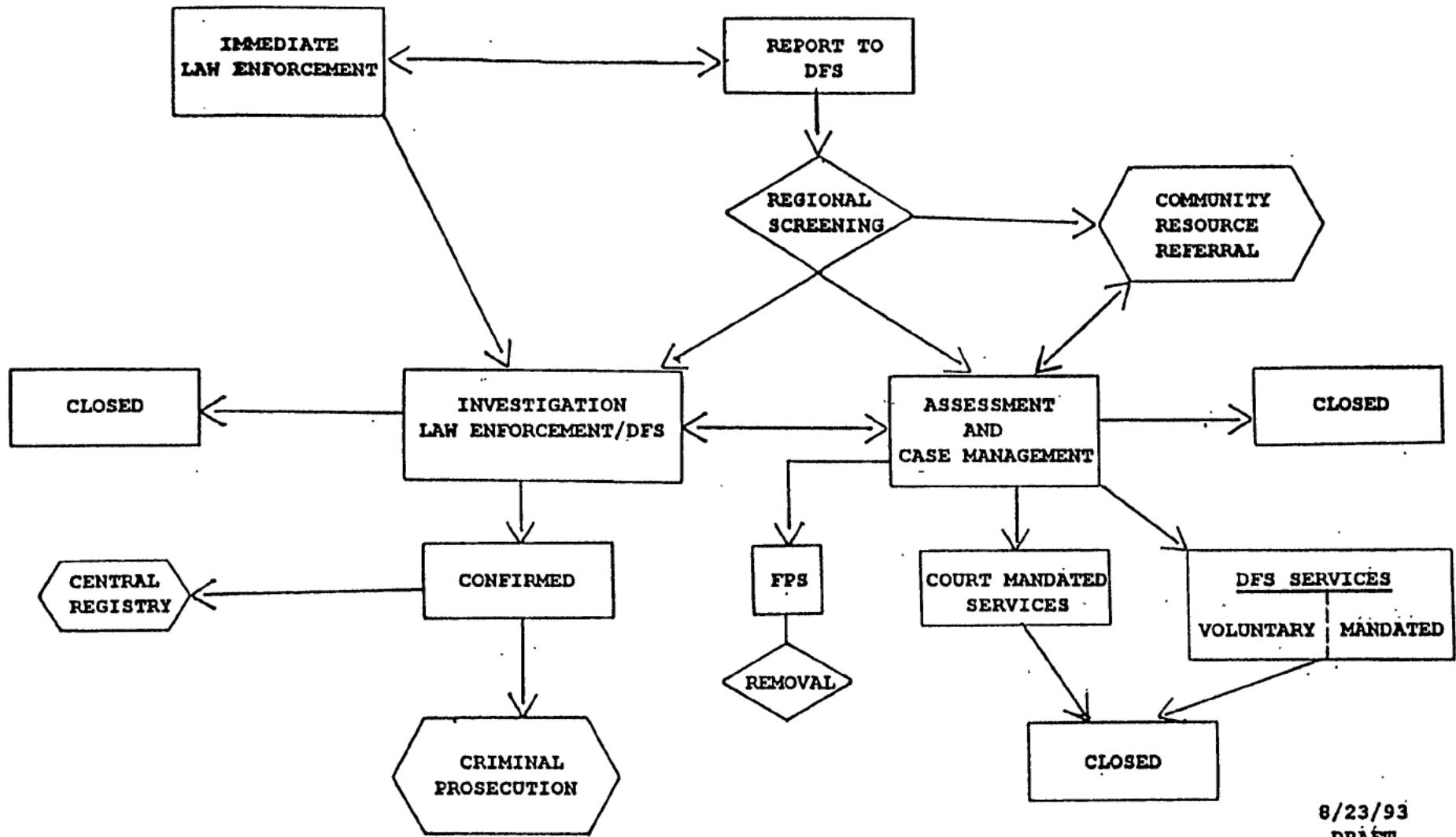
"I have kids in my case load where abuse causes their heads to look like road maps...I have had 23-58 cases at one time."...**Ann Conn, Springfield**

"Child abuse is child abuse and it doesn't matter who commits it, but we need a system that increases the specialization of DFS workers and recognizes the State's duty to protect and preserve families."...**Senator Joe Moseley, Columbia**

"I've found a vast difference in the services across the state."...**Gus Kolis, Department of Social Services, State Technical Assistance Team, Jefferson City**

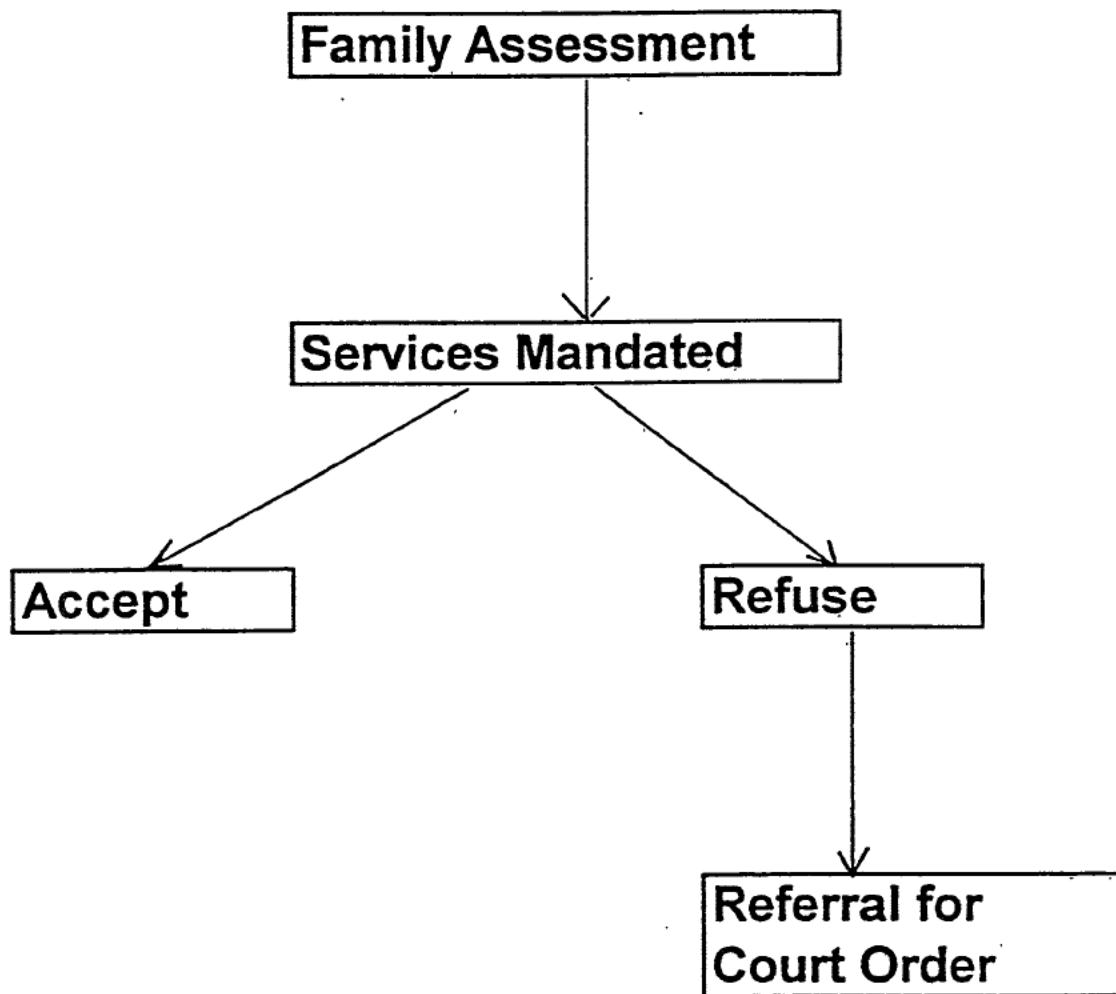
"Unemployment, poverty and substance abuse are primarily the causes of child abuse and neglect."...**Mary Hackett, Court Appointed Special Advocates, St. Louis**

MISSOURI CHILD PROTECTIVE SYSTEM

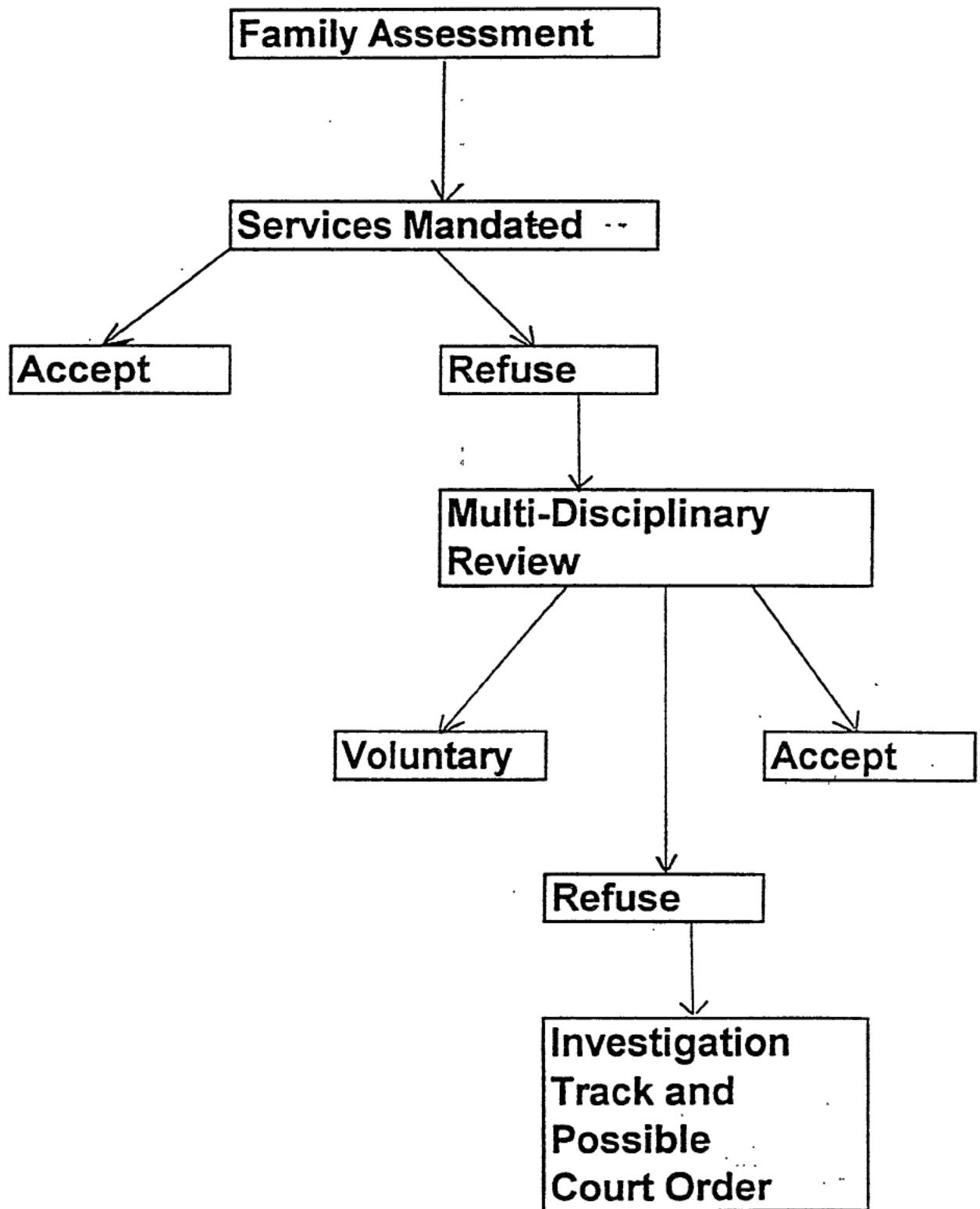


MANDATED SERVICES

OPTION 1



MANDATED SERVICES OPTION 2



DISPOSITION OF C/A/N HOTLINE CALLS - 1992

Information Requested	16,319
* Incomplete Calls	10,000
Safekeeping Requests	2,306
Juvenile Court Referrals	881
Law Enforcement Referrals	606
** Dept of Health Referrals	264
Parental Stress Hotline Calls	3,179
Reports Accepted for Investigation	49,286
Total All	82,841

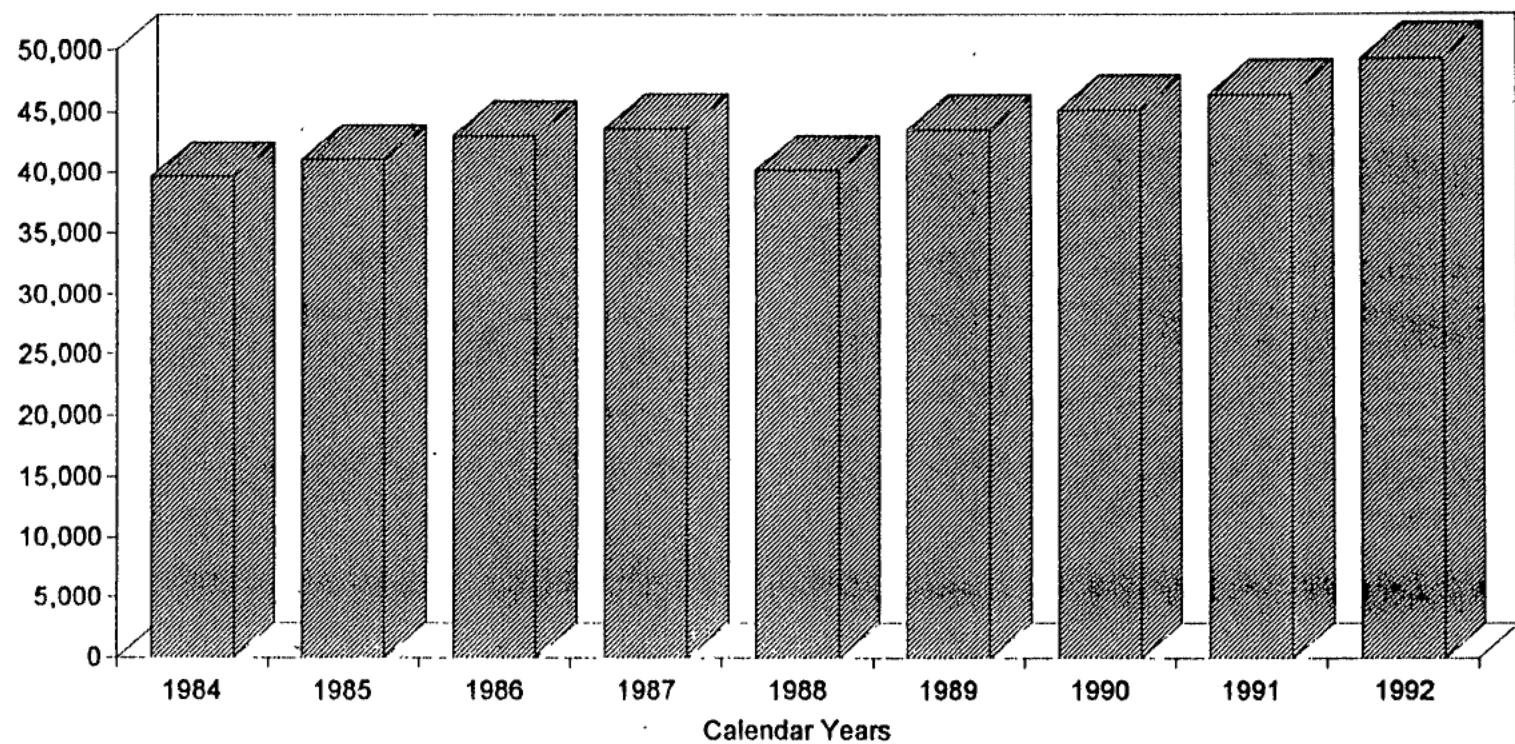
* These are reports where there was insufficient information received from the reporter to investigate the incident.

** These are reports involving children or parents who have tested positive for drugs which are referred to the Department of Health. These statistics reflect calls received from August through December of 1992.

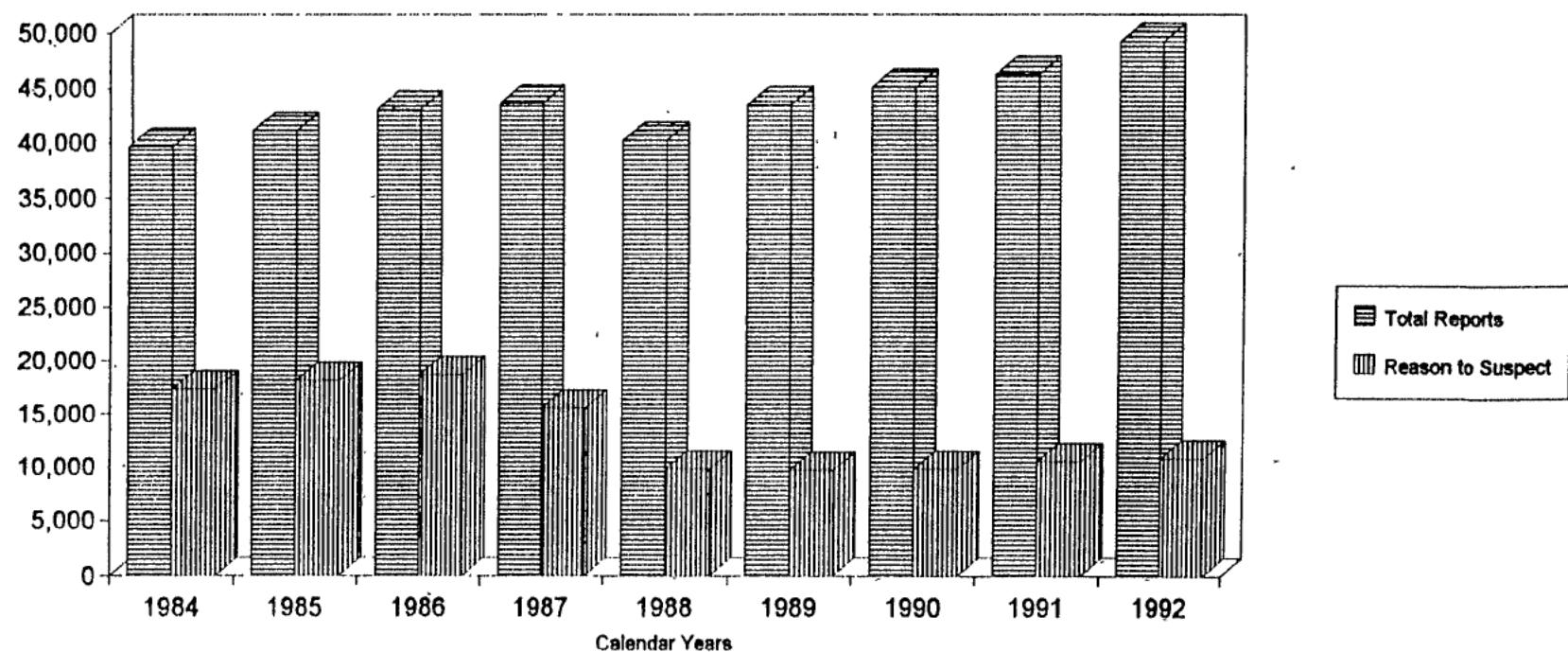
CHILD ABUSE/NEGLECT REPORTS 1984-1992

Year	Preventive		Unsubstantiated	Total All
	Reason to Suspect	Services Indicated		
1984	17,388	N/A	22,298	39,686
1985	18,156	N/A	22,977	41,133
1986	18,720	N/A	24,375	43,095
1987	15,549	N/A	28,127	43,676
1988	9,897	3,456	26,896	40,249
1989	9,790	3,932	29,839	43,561
1990	9,909	3,989	31,245	45,143
1991	10,641	3,343	32,376	46,360
1992	10,909	4,531	33,846	49,286

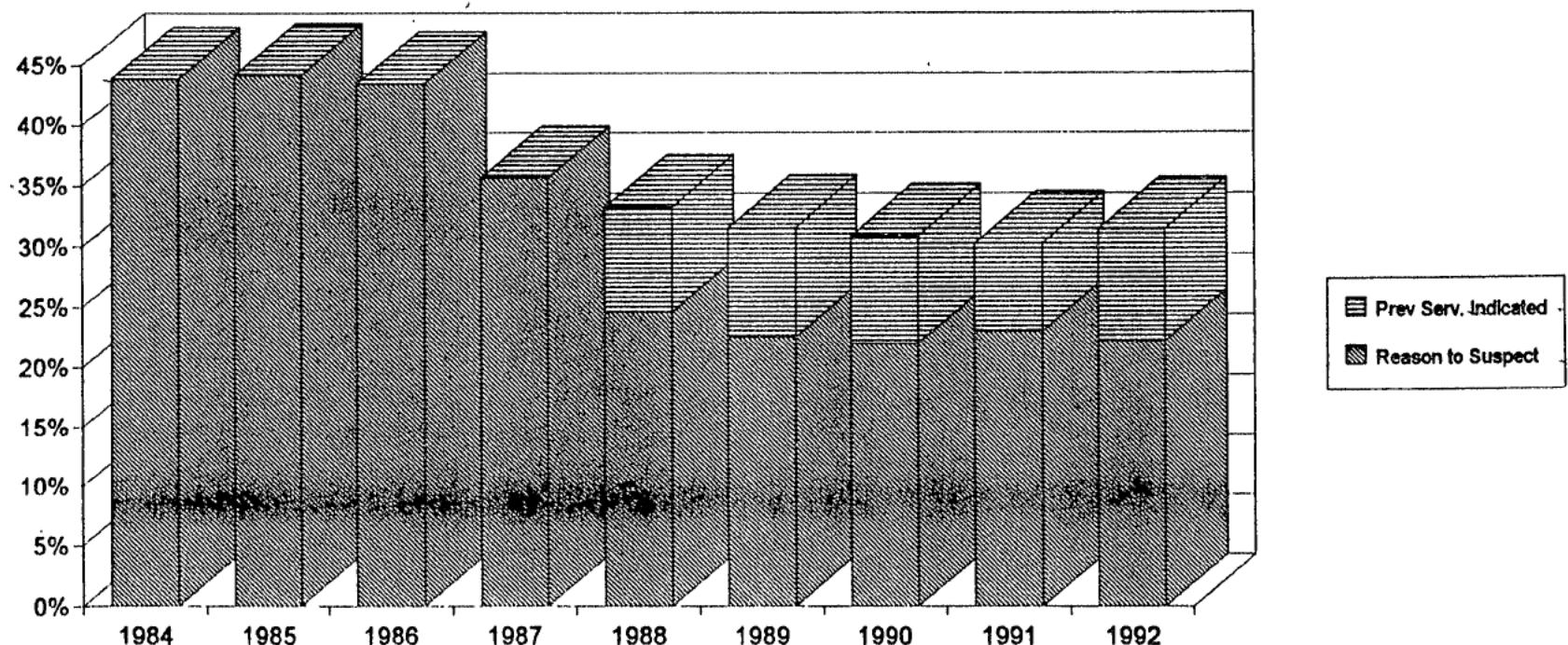
CHILD ABUSE/NEGLECT REPORTS 1984-1992



CHILD ABUSE/NEGLECT REPORTS AND REASON TO SUSPECT REPORTS 1984-1992



CHILD ABUSE/NEGLECT REPORTS 1984-1992 - PERCENT OF REASON TO SUSPECT REPORTS



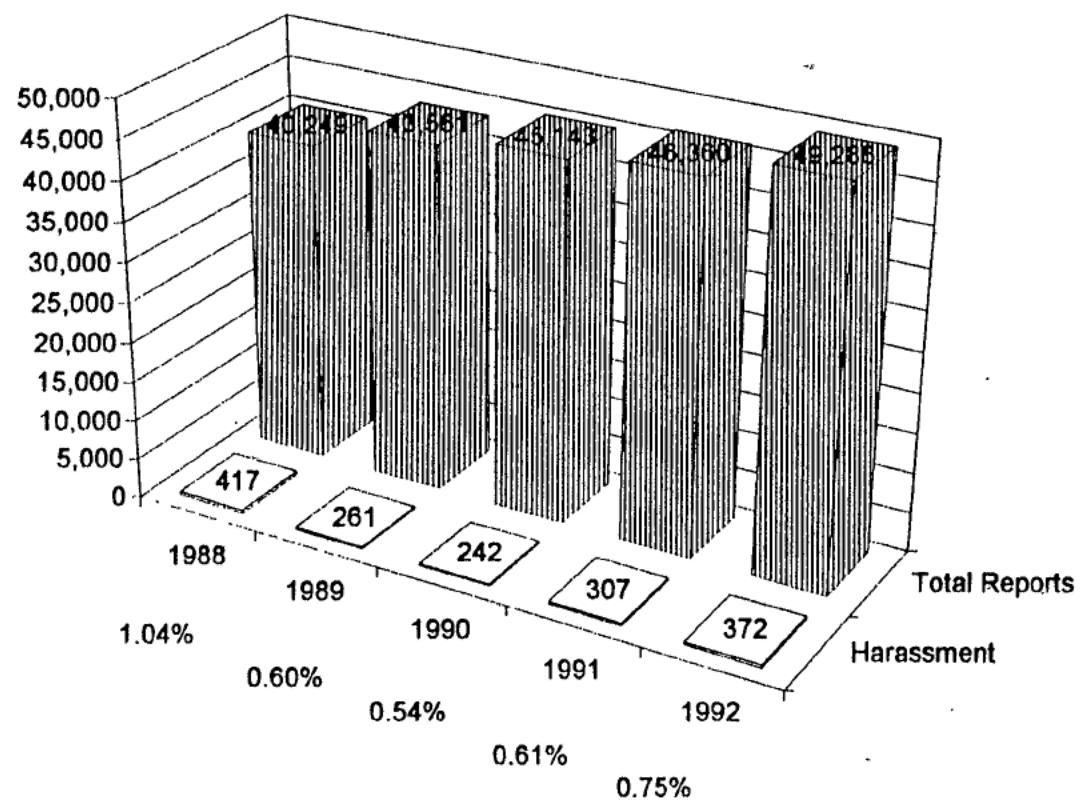
REASON TO SUSPECT CONCLUSIONS BY TYPE OF ABUSE - 1992

	Neglect	Physical	Sexual	Educational	Emotional	Medical	Total	All
1988	9,833	3,109	2,289	1,344	516	581	17,672	
1989	9,449	2,860	2,297	1,547	361	566	17,080	
1990	9,277	2,980	2,291	1,418	310	563	16,839	
1991	9,899	3,329	2,617	1,527	322	565	18,259	
1992	9,711	3,256	2,731	1,791	317	599	18,405	

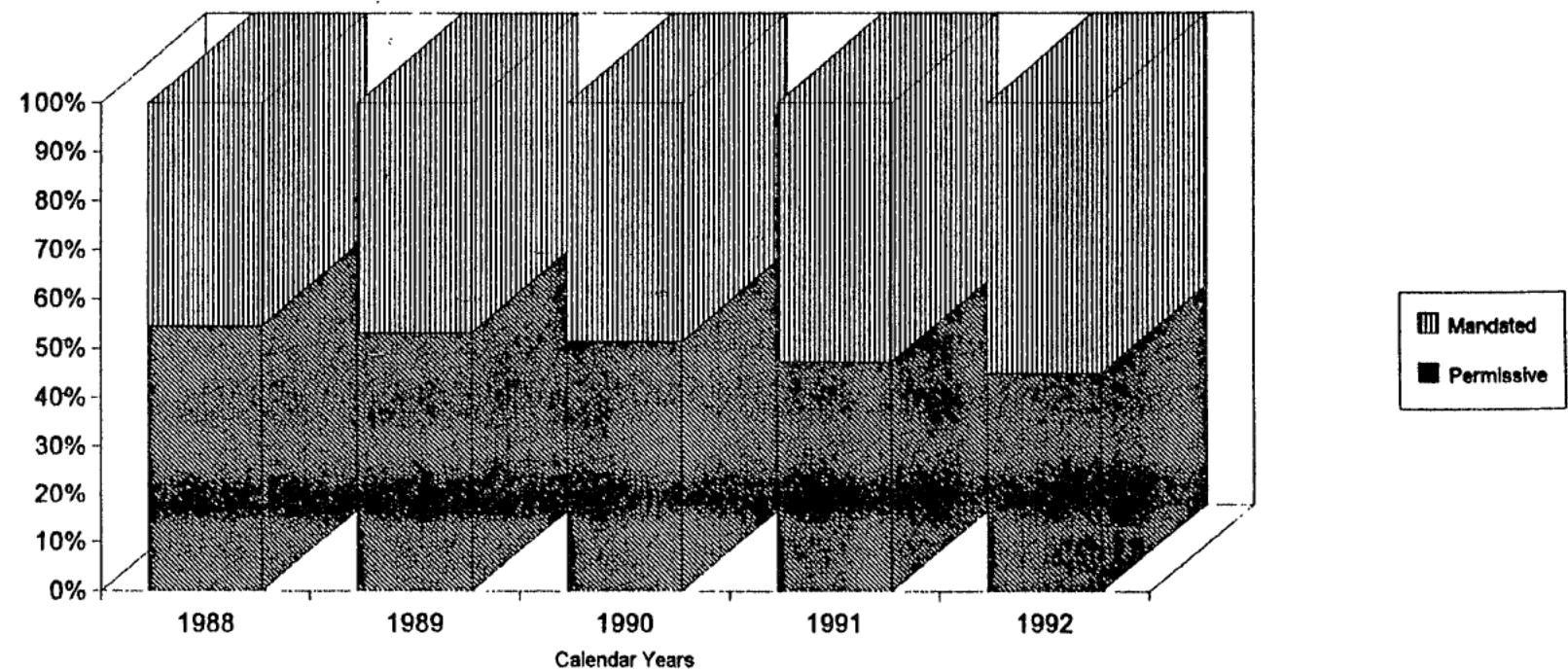
REASON TO SUSPECT CONCLUSIONS BY TYPE OF ABUSE - 1992

	Neglect	Physical	Sexual	Educational	Emotional	Medical	Total	All
1988	56%	18%	13%	8%	3%	3%		100%
1989	55%	17%	13%	9%	2%	3%		100%
1990	55%	18%	14%	8%	2%	3%		100%
1991	54%	18%	14%	8%	2%	3%		100%
1992	53%	18%	15%	10%	2%	3%		100%

TOTAL CA/N REPORTS vs. HARASSMENT REPORTS 1988-1992

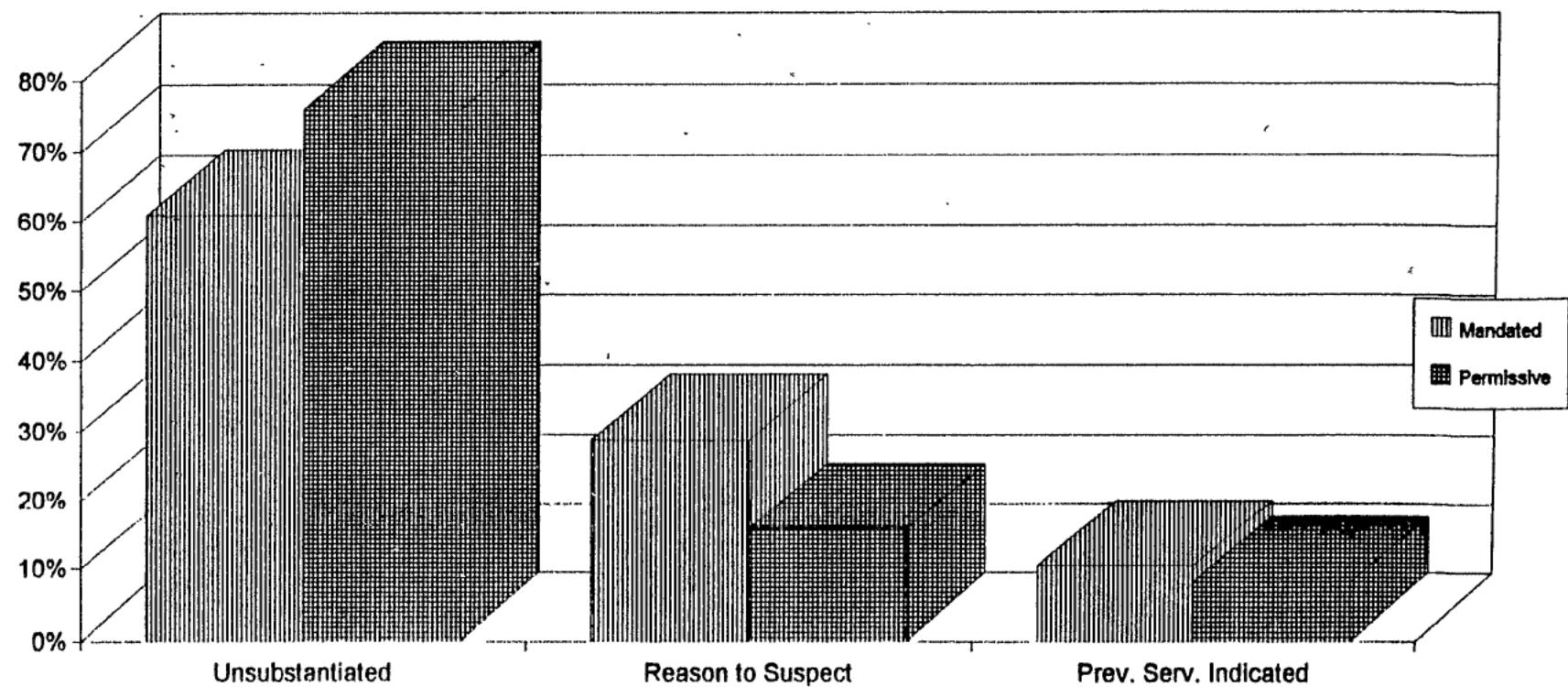


**CHILD ABUSE/NEGLECT REPORTERS 1988-1992 -
MANDATED vs. PERMISSIVE**

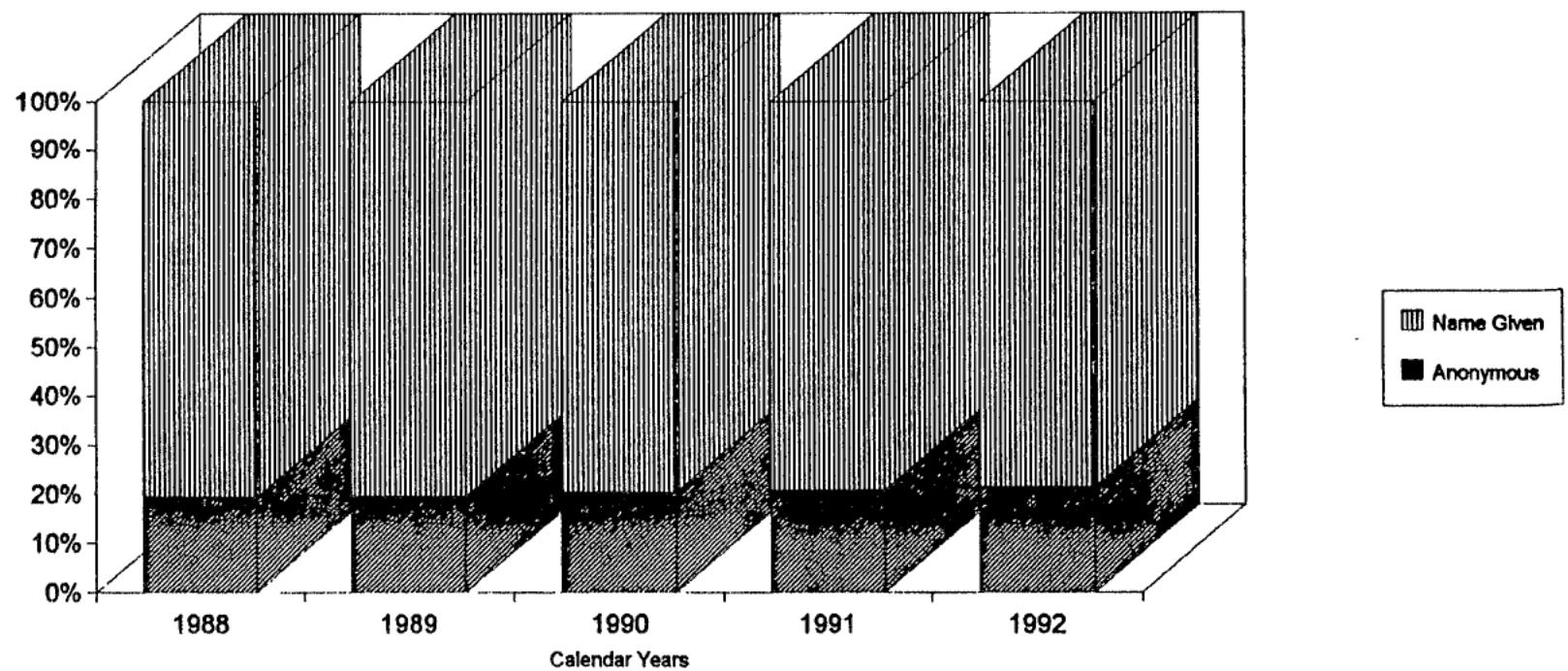


PERMISSIVE vs. MANDATED REPORTERS BY REPORT CONCLUSION - 1992

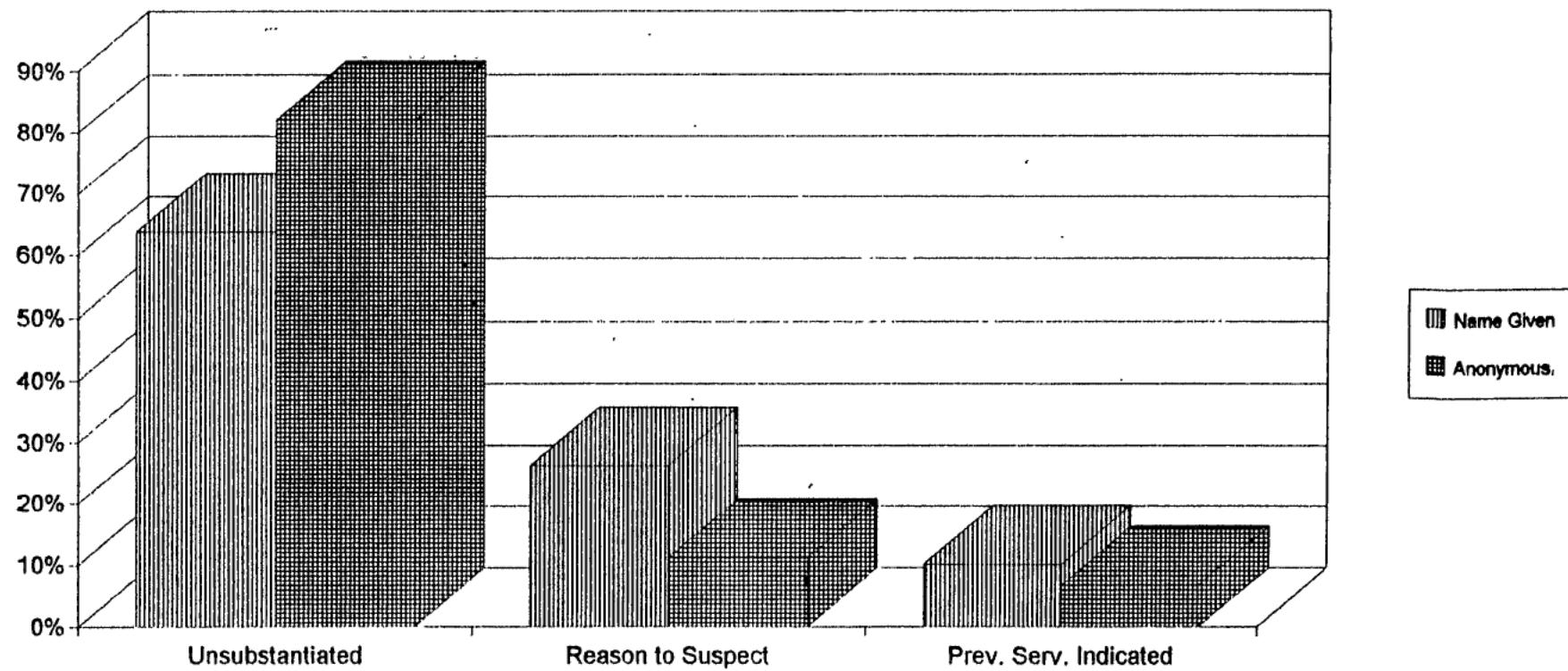
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CHILD ABUSE/NEGLECT REPORTERS 1988-1992 - ANONYMOUS vs. NAME GIVEN



ANONYMOUS vs. NAME GIVEN REPORTERS BY CONCLUSION - 1992



CHILD ABUSE/NEGLECT REPORTERS

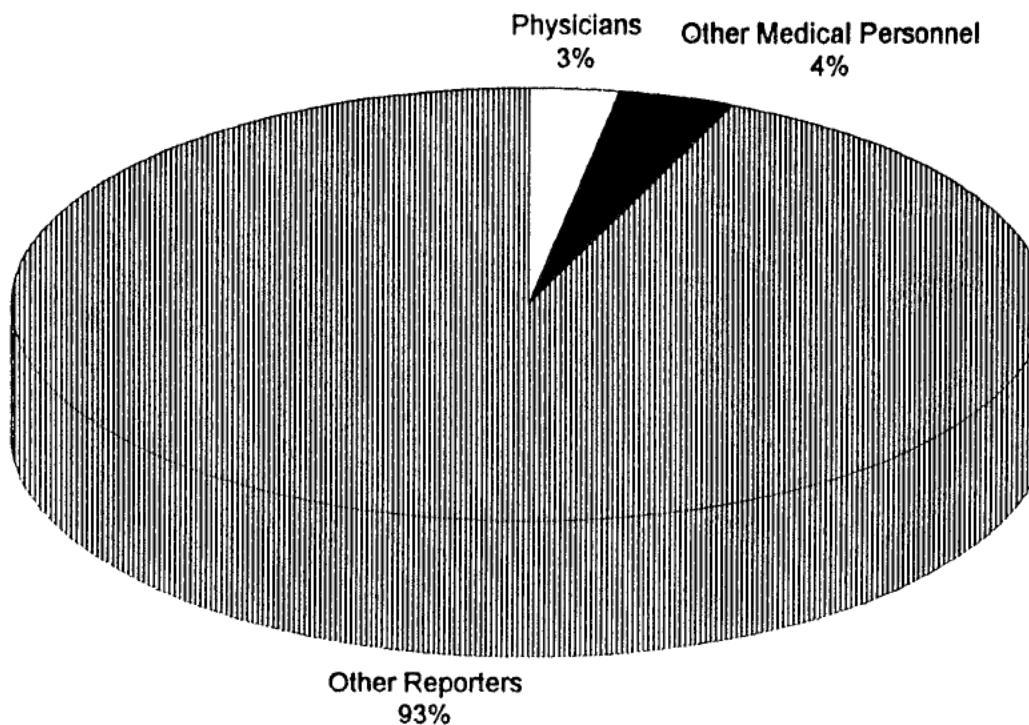
1. CA/N Reporters - Anonymous vs. Name Given

	Anonymous	Name Given	Total
1988	8,061	33,280	41,341
1989	8,819	35,948	44,767
1990	9,521	36,922	46,443
1991	10,079	38,144	48,223
1992	11,070	40,046	51,116

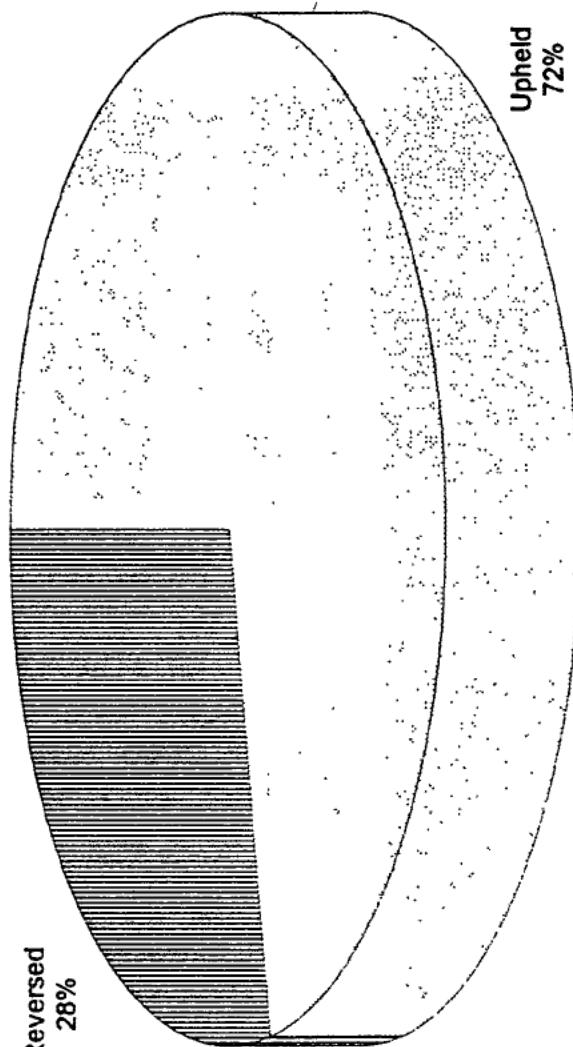
2. CA/N Reporters - Mandated vs. Permissive

	Permissive	Mandated	Total
1988	22,603	18,738	41,341
1989	23,910	20,857	44,767
1990	23,981	22,462	46,443
1991	22,888	25,335	48,223
1992	23,119	27,997	51,116

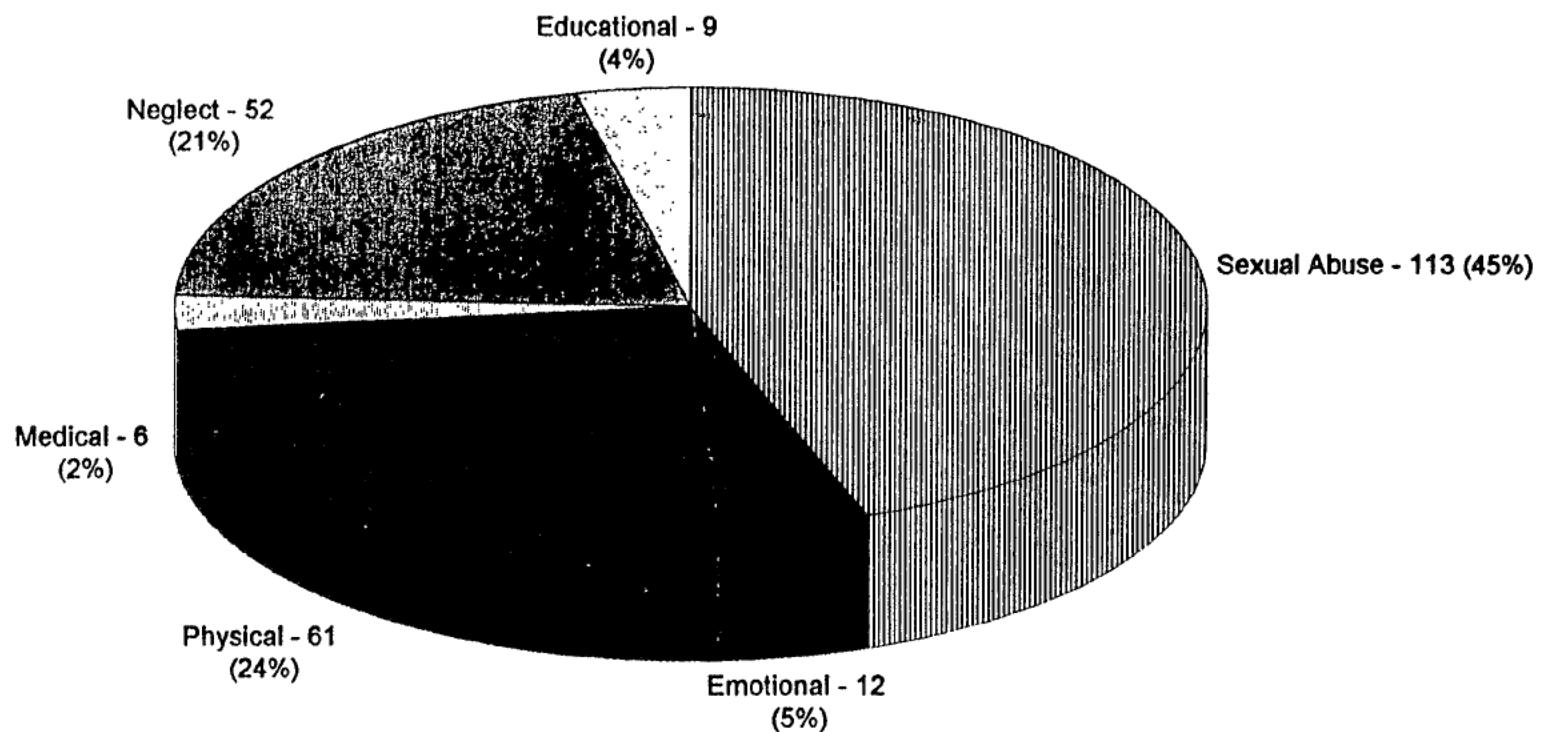
MEDICAL PERSONNEL REPORTERS vs. ALL OTHER REPORTERS



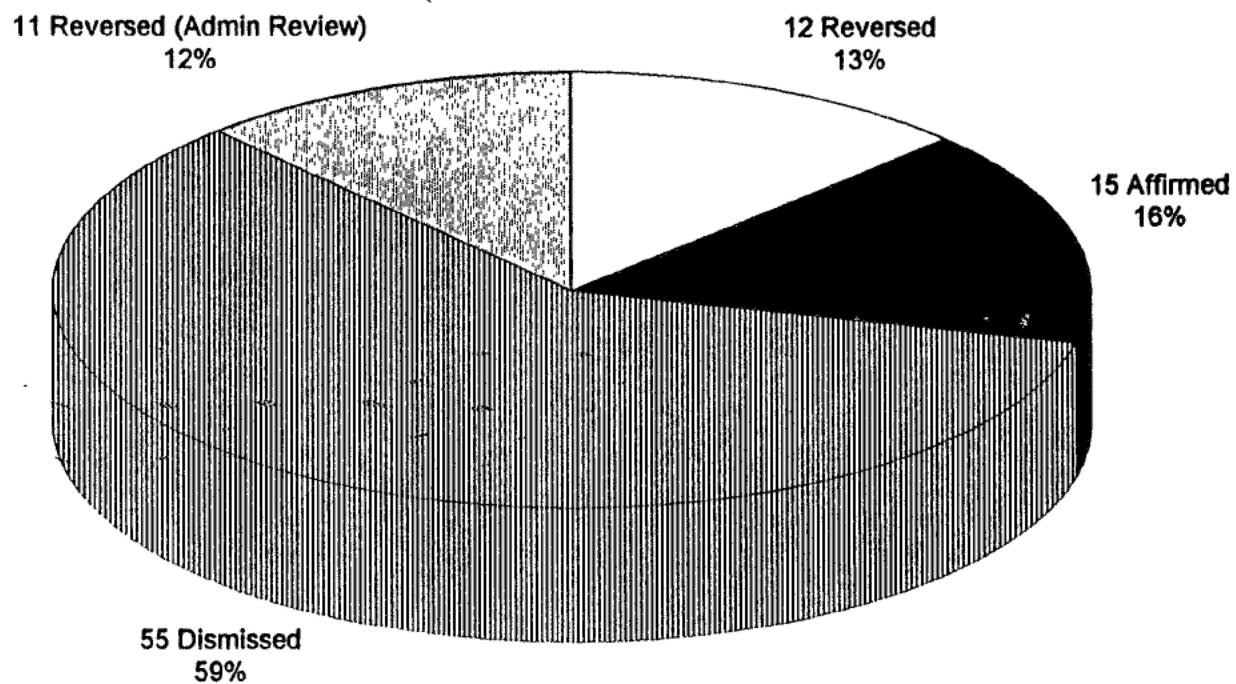
CHILD ABUSE/NEGLECT REVIEW BOARD - UPHELD vs.
REVERSED - 1992



CHILD ABUSE/NEGLECT REVIEW BOARD TYPES OF INCIDENTS APPEALED - 1992



CA/N JUDICIAL REVIEW APPEAL RESULTS (FY93)



Current Trends in Child Abuse Reporting and Fatalities:

The Results of the 1992 Annual Fifty State Survey

**Karen McCurdy, M.A., Principal Analyst
Deborah Daro, D.S.W., Director**

Prepared by:

**The National Center on Child Abuse Prevention Research,
a program of
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NCPCA encourages reprinting of this working paper. As working papers are updated regularly, please check with our Publishing Department before reprinting to ensure you are using the most recent version.

April, 1993

Other NCPCA Publications

The National Committee for Prevention of Child Abuse (NCPCA) publishes a variety of educational materials that deal with parenting, child abuse, and child abuse prevention. The NCPCA catalog is available free upon request from NCPCA, Catalog Requests, 332 S. Michigan Ave., Suite 1600, Chicago, IL 60604, (312) 663-3520, TDD (312) 663-3540.



CURRENT TRENDS IN CHILD ABUSE REPORTING AND FATALITIES:
THE RESULTS OF THE 1992 ANNUAL FIFTY STATE SURVEY

OVERVIEW

Concern for the welfare of children, particularly those who are abused or neglected, has been longstanding among public and private social service agencies and professionals. Legislation which defines child abuse and determines the appropriate role for child welfare agencies has been a part of state statutes for over 200 years. In 1974, the Federal government adopted a more direct role in child abuse policy with the passage of the Child Abuse Prevention and Treatment Act (P.L. 93-247). Although the passage of this legislation established a set of uniform operating standards with respect to the identification and management of child abuse cases, individual states continue to determine definitions of maltreatment, investigative procedures, service systems and data collection procedures. Consequently, limited information is readily available on the scope of the child abuse problem and the availability of resources nationwide.

To provide the field with these data, the National Committee for Prevention of Child Abuse (NCPCA) began collecting detailed information from all fifty states and the District of Columbia on the number and characteristics of child abuse reports, the number of child abuse fatalities and changes in the funding and scope of child welfare services in 1986. This report summarizes the findings from the most recent survey. These data represent the only available estimate of the number of child abuse reports and fatalities nationwide for 1992.¹

SURVEY QUESTIONS

In February of 1993, NCPCA's National Center on Child Abuse Prevention Research sent a letter to the federally appointed liaisons for child abuse and neglect in each state and the District of Columbia requesting their support for this annual survey. A brief questionnaire accompanied the letter outlining the specific areas of interest including the following topics:

- o the actual number of child maltreatment reports filed during 1990, 1991 and 1992;
- o the factors accounting for any observed changes in reporting levels during the past year;
- o the number of substantiated and indicated victims for 1990, 1991 and 1992;
- o the number of reports by type of maltreatment (e.g., physical abuse, neglect, sexual abuse, and emotional maltreatment);

- o other characteristics of the reported population such as the number of cases involving children in non-familial settings;
- o the number of child abuse fatalities reported for 1990, 1991 and 1992;
- o the effect of substance abuse on caseloads and the availability of programs designed to respond to this problem; and
- o the functioning of the child protective service agency including funding levels, prevention efforts and staff training.

The state liaisons were contacted by telephone to obtain the above information though some replied in writing. All states except Washington and West Virginia responded by the end of March, 1993. Of the 49 respondents, 40 knew or were able to project their child abuse reporting statistics for 1992 and 36 respondents gave 1992 statistics with respect to child abuse fatalities. All 49 respondents answered general questions on their state's child welfare practices.

SPECIFIC FINDINGS

Reporting Rates

Table 1 presents the annual percentage change in state child maltreatment reports between 1985 and 1992. Nationwide, the rate² of children reported for child abuse or neglect increased 50% during this period, from 30 per 1,000 children in 1985 and to 45 per 1,000 in 1992. In 1992, an estimated 2,936,000 children were reported to Child Protective Services (CPS) agencies as alleged victims of child maltreatment. This figure is based on information collected from 40 states which indicated that each state averaged a 7.8% increase in reports between 1991 and 1992.³ As shown in Table 1, this increase is slightly higher than the 6.5% rise which occurred between 1990 and 1991. Overall, child abuse reports have maintained a steady growth between 1985 and 1992 with an average increase of about 6% each year. This growth rate, while representing a sizable expansion in the number of reports, is around half the rate of growth reported in the first half of the decade. Between 1980 and 1985, reports rose an average of 11.4% (AAPC, 1988).

The increase in reports noted between 1991 and 1992 reflects a nationwide trend and is not the result of large increases in a few states. Overall, 35 states reported either an actual or expected increase in 1992 as did 36 states in 1991. Of these, 12 states experienced increases of 10% or more. Only four respondents noted actual or expected declines in their reports. Both Tennessee

Table 1

CHILD ABUSE AND NEGLECT REPORTS
ANNUAL PERCENTAGE CHANGE

State	85-86	86-87	87-88	88-89	89-90	90-91	91-92
Alabama	-5	4	7	-7	-1	14	0 C
Alaska	16	NA	-3	-5	0	14	12 R
Arizona	12	1	12	22	6	4	23 C
Arkansas	13	1	NA	0	1	1	-3 C
California	16	7	29	13	3	3	8 C
Colorado	-6	11	24	-4	12	-2	NA R
Connecticut	2	9	NP	-1	-2	3	8 C
Delaware	-2	NA	0	-6	0	9	9 R
District of Columbia	21	6	0	20	-4	13	16 C
Florida	-2	0	6	19	NP	1	NA (+) C
Georgia	17	26	-8	26	1	42	-10 R
Hawaii	10	-2	-18	-6	17	-1	NA (+) R
Idaho	5	0	1	1	11	2	3 R
Illinois	1	30	3	9	1	4	22 C
Indiana	3	-16	5	29	27	22	8E C
Iowa	2	0	2	4	4	-2	NA C
Kansas	-9	25	-12	-4	0	NP	3 C
Kentucky	13	8	5	2	7	9	9 C
Louisiana	22	-14	0	1	-1	10	2 C
Maine	-4	-14	NP	-8	-9	2	0E C
Maryland	24	5	8	+5	2	8	3 R
Massachusetts	5	1	17	15	17	7	1 C
Michigan	15	-2	-3	2	4	-4	5 R
Minnesota	14	11	2	-5	-8	13	NA(+) C
Mississippi	23	18	9	0	8	4	22 C
Missouri	5	1	-8	7	2	4	4 C
Montana	10	6	-1	7	8	7	29 C
Nebraska	-1	-3	-2	-2	2	9	0 C
Nevada	10	3	31	12	12	5	NA R
New Hampshire	4	9	5	13	10	18	10 R
New Jersey	7	0	13	3	-7	-1	NA(-) C

State	85-86	86-87	87-88	88-89	89-90	90-91	91-92
New Mexico	-5	-2	9	49	17	21	48 C
New York	14	10	17	7	7	-1	2E C
North Carolina	7	19	NP	31	15	35	8 C
North Dakota	NA	NA	NA	3	11	7	10 C
Ohio	4	1E	6E	3	6	9	0 R
Oklahoma	9	4	1	0	9	-15	13 R
Oregon	8	3	6	15	-5	-1	9 R
Pennsylvania	-1	-2	9	6	4	-2	NA(+) C
Rhode Island	3	-2	11	16	24	1	4 C
South Carolina	12	-2	-1	3	NP	-3	16 C
South Dakota	12	6	3	2	2	-1	-6 C
Tennessee	3	NA	NA	6	1	-4	-10 C
Texas	8	-4	NP	12	13	10	17 C
Utah	9	-1	-1	12	2	13	5 R
Vermont	1	-9	7	9	-1	0	3 C
Virginia	-4	0	5	5	NP	13	7 C
Washington	7	-8	NP	2	0	5	DNR R
West Virginia	5	1	3	1	-7	-2	DNR R
Wisconsin	11	2	6	11	12	16	NA C
Wyoming	59	12	3	2	9	4	0 C
Average Percentage Change	+8%	+3%	+5%	+7.5%	+5.0%	+6.5	+7.8

Estimated Number of Children Reported for Maltreatment	1985	1986	1987	1988	1989	1990	1991	1992
Per 1,000 U.S. Children	1,919,000	2,086,000	2,157,000	2,265,000	2,435,000	2,557,000	2,723,000	2,936,000

E Estimate

DNR Did not respond to survey

NA Not Available

NA () Indicates direction of expected change, i.e. (-) decrease, (+) increase.

NP The change could not be calculated due to a change in data collection procedures (i.e., switched from families to children)

C = change in # of children reported between 1991 and 1992

R = change in # of reports (e.g., families, incidents or reports) between 1991-1992

and Georgia experienced 10% declines in reports. Arkansas and South Dakota were the other two states noting a decrease. Five states, Alabama, Maine, Nebraska, Ohio and Wyoming reported virtually no change. Of the nine states unable to provide an estimate of change, four (Florida, Hawaii, Minnesota and Pennsylvania) anticipate an increase in reports, one (New Jersey) predicts a decrease while Colorado, Iowa, Nevada and Wisconsin did not make a prediction.

Factors Accounting for Reporting Changes

To help determine whether these changes represent an actual increase in child abuse or merely reflect a more accurate assessment of the problem, we asked each liaison to name the two most significant factors which accounted for the reporting trends in their state. While these answers are not based on quantitative data, they give a descriptive appraisal of those factors CPS administrators consider the most relevant. Thirty-four of the 35 states with an increase responded to this question. The most frequently noted factor for expanded reports was **economic stress** due to poverty, unemployment and related work concerns named by 38% of respondents (15 states). Next, 32% or 11 states cited **substance abuse** as a major contributor to growth in reports. A large portion of states (29%) indicated that **increased public awareness** explained much of the rise. In addition, 21% (7 states) attributed the increase either to improvements in the internal counting system of their agencies or changes in reporting laws. Three states (Kansas, Massachusetts and New York) felt that their increases were so slight as to represent no change in reports.

The responses of the two states with the largest increases reflect those of the entire group. The New Mexico liaison emphasized the influence of the recession and poverty on increased reports. Additionally, substance abuse has impacted child maltreatment in New Mexico with alcohol representing the principal drug of choice. In Montana, the respondent stated that the 29% rise in reports primarily resulted from increased public awareness. Interestingly, she also stated that, in her opinion, the recent practice of lawyers advising clients to allege abuse during custody battles contributed to an increase in total reports. This perception was confirmed by staff at the NCPCA chapter in Montana.

Five states had or predicted a decrease in reports. Of the four states explaining this change, only South Dakota attributed the drop to prevention efforts. This liaison stated that increased public education contributed to the decline as did a narrowing of the definition of child abuse and neglect. Two of the remaining states indicated that changes in counting procedures or increased screening caused the decrease. For example, the Georgia liaison attributed their 10% drop to the automation of the reporting system. Tennessee, with the same change, noted that a hiring freeze resulted in fewer resources to conduct investigations. The New Jersey respondent stated that the expected decline is not a substantial change and reflects overall stability in reports.

It should be noted that at least six states mentioned that their reporting systems had reached the saturation point, thereby resulting in fewer reports being investigated or counted as a report. In some states, the overwhelming number of reports have caused workers to investigate only the most serious allegations of abuse and neglect. As one respondent pointed out, this recent practice has produced much higher risk families entering the child protective service system than in earlier years.

Overall, most state liaisons believe that the steady escalation in reports is due to an actual increase in maltreatment as a consequence of economic stress and substance abuse. Many also acknowledge the impact of public awareness and reporting changes on this rise. States with declines in reports are much more likely to acknowledge increased screening as the reason rather than successful prevention efforts. Finally, a comparison of these numbers to previous years may be misleading as more and more states are screening reports due to overwhelming caseloads and limited staffing. The fact that reports continue to rise despite increased screening may indicate that not only is child maltreatment expanding, but that children may need to experience more harmful forms of abuse and neglect before they will be recognized as requiring protective or supportive services.

Reporting Procedures

Wide variation in states' reporting procedures prevents a direct comparison of the reporting rates for each state. To gain an understanding of these differences, we asked each state to describe their data collection process. Some consensus exists across state data collection systems. For example, the vast majority (42 states) have a centralized reporting registry. About half of the states maintain statistics on a calendar year while the other half utilize a fiscal year. Most states count two or more reports concerning the same episode of maltreatment as one report. Thirty-six states (74%), however, keep duplicate counts as they consider different episodes of maltreatment involving the same child or family as separate reports. Four states (8%) provide unduplicated counts while nine states (18%) can produce both sets of numbers. When asked whether a report is based on a child, family, incident or other measure, the majority of states indicated multiple methods of counting. For those states maintaining data in a single form, 13 states (27%) count incidents; 9 states (18%) count children while one computes these statistics by families.

The final area of discrepancy involves what constitutes a report. States vary by how they define the following terms: abuse and neglect, a report and a perpetrator. Detailed descriptions of each state's definition of abuse and neglect are already available (U.S. Department of Health and Human Services, 1987). This survey examined the last two terms. While forty states (82%) indicated that their total number of reports only included those resulting in an investigation by CPS, the amount of screening varied substantially by state. For the 15 states which could provide an

estimate of screening, an average of 27% of reports are screened prior to investigation though this ranged from 1% to 50%. Thus, the actually number of reports filed in some of these states might be significantly higher than the official number of reports indicated in state records. For nine states (18%), their numbers include any report of child abuse and neglect which they received, whether or not an investigation was conducted.

Finally, the scope of reportable acts in each state varied by the state's laws and policies regarding perpetrators. For example, in at least 90% of the states, alleged child maltreatment by a foster parent, day care provider, residential/institutional caregiver or paramour would be included in reporting statistics. However, only 70% of the states count maltreatment by school personnel as a reportable case of abuse. In many cases, these incidents would be considered child assault and be investigated by the school district or the police instead of child protective services. For 30 states (61%), charges against an out of home girlfriend or boyfriend would be routinely investigated by CPS and 34 states (69%) classify charges against an out-of-home relative as a reportable act of maltreatment. Only 27 states (55%) include alleged maltreatment by a neighbor or acquaintance in their reporting statistics. In the case of these last three types of perpetrators, most respondents indicated that this person (i.e., out-of-home girlfriend) would only be investigated by CPS if he or she was in a caretaking position at the time of the incident. Lastly, 19 states (39%) include alleged maltreatment by strangers in their total count of reports. Some states clarified that although assaults by these individuals would not be covered under child welfare statutes, these acts would be subject to criminal investigations.

Substantiation Rates

The debate over how to estimate the national substantiation rate is almost as intense as the debate over how to interpret this statistic. In 1986, one national study which obtained information from 40 states and a U.S. territory estimated a substantiation rate of 40-42% (AAPC, 1988). During that same year, a national incidence study analyzed data from designated reporters in a random sample of 29 counties and determined that the national rate hovered at 53% (Westat, 1988). The disparate findings have been attributed to several factors such as the definition of "substantiation," the inclusion of duplicate reports, and the specific denominator utilized by each study (American Public Welfare Association, 1990; Besharov, 1990).

Unfortunately, a standardized method for recording this statistic does not exist across the nation. This survey asked each state liaison to provide the number of substantiated and indicated victims for 1990 to 1992. Originally, we had hoped to add up the number of child victims to obtain an accurate count of the number of substantiated children. However, states varied in the manner in which they kept this statistic. Some could only provide the number

of substantiated incidents while others provided the number of substantiated families. As respondents were also asked to provide the substantiation rate for these same years, we relied on this figure in our calculations. No attempt was made to standardize these figures. For eight states, this statistic is based upon all reports. For 38 states, the rate only includes investigated reports. Consequently, care should be taken in interpreting the meaning of this statistic within or across states.

Five states (California, Colorado, Florida, Washington and West Virginia) did not provide substantiation rates for any previous year. Thirty-seven states gave 1992 figures which ranged from 13% to 72%. Nine states presented 1991 rates which varied between 33% to 49%. Using the most recent rate available for each state, the 46 states had an average substantiation rate of 40% which resembles previous rates found by NCPCA and by the American Public Welfare Association using comparable methodology (APWA, 1990). Using this statistic, an estimated 1,160,400 children were substantiated as victims of child abuse and neglect in 1992. This represents a 10% increase over the approximately 1,049,490 children found to be victims of maltreatment in 1991.

Services to Abusive Families

A more critical question concerns what happens to the child or family after a case has been substantiated. One study found that CPS social workers did not provide any service in almost 60% of the agency's confirmed cases (Meddin & Hansen, 1985) while a review of New York cases found that almost 56% of all indicated cases are closed the same day they are officially substantiated (Salovitz & Keys, 1988). In the current survey, only 19 states could provide an estimate as to the percentage of substantiated cases which received CPS services. Figures ranged from 29% to 100% with an average of 60% receiving some type of service. This continues the downward trend from previous years as 78% received services in 1990 while only 63% did so in 1991. When asked to explain whether this percentage had changed from previous years, 12 states cited an increase and seven states noted a decrease. Nineteen states said the percentage had stayed the same while 11 states did not respond.

Removal of the Child

In many states, the primary service provided to the abused child is removal from the home either during the investigation or after the allegation of maltreatment has been substantiated. When asked the total number of children removed from the home where abuse occurred, 27 states provided figures. Over 63,000 children from these states were placed in alternative care for some period of time in 1992. For the twenty-four states who provided both the number of children removed and the number of child victims, approximately 14% of child victims were removed from the home in 1992. In 1991, 19% of child victims in 25 states were removed.

Case Characteristics

To provide appropriate prevention and treatment services, it is necessary to determine the prevalence of different types of maltreatment as well as other characteristics of the CPS caseload. In 1986, the American Association for the Protection of Children reported that approximately 26% of all reports involved charges of physical abuse, 16% involved charges of sexual abuse, 55% involved charges of child neglect, 8% involved charges of emotional maltreatment and 8% involved other or unspecified forms of maltreatment (AAPC, 1988). To assess whether these percentages had changed over time, each state liaison was asked to provide a percentage breakdown by these four types of maltreatment for reported or substantiated cases in 1990, 1991 and 1992. Thirty-five states provided data for all three years with the results indicating that these percentages have remained fairly constant across states and across time. However, great variation exists in the ways states classify reports. For example, three states utilized only two categories: neglect and abuse. Fourteen states did not have a separate classification for emotional maltreatment. Finally, several states included less severe forms of neglect in the "other" category.

In calculating the percentage breakdown by type of maltreatment, we only included those states who classified cases according to all four types of maltreatment: physical abuse, sexual abuse, neglect and emotional maltreatment. Two states were excluded from these calculations: Arizona, which classifies over 50% of reports as "other" and North Carolina where neglect accounted for 90% of reports. Twenty-one states provided a breakdown for 1992 reports while an additional ten states gave these figures for 1991.

As Table 2 indicates, the distribution for all cases closely parallel the findings reported earlier by AAPC (1988) with the exception of neglect: 27% physical abuse, 17% sexual abuse, 45% neglect, 7% emotional maltreatment and 8% other. The variation in these statistics is partially explained by the fact that the AAPC (1988) study counted all allegations per child while most states in the present study reported only the primary allegation presented in each case. Such a system may tend to under count the true incidence of neglect reports in that this form of maltreatment frequently occurs in conjunction with other types of abuse deemed more serious by the investigators.

The distribution of cases across maltreatment types varies by reported versus substantiated cases. For example, both physical abuse and neglect constitute greater percentages of reported cases than substantiated cases with a significant difference for physical abuse ($t=3.68$, $p<.01$). Sexual abuse and emotional maltreatment have the opposite effect as they comprise a higher percentage of substantiated cases than reported cases. In this case, emotional maltreatment accounts for a significantly greater portion of substantiated cases than reported cases ($t=-2.79$, $p<.01$). This

Table 2
Type of Maltreatment*

Data from those states with comparable classification systems for the four major types of maltreatment ^b	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Other ^c
	Mean (SD)	Mean (SD)	Mean (SD)	Mean (SD)	Mean (SD)
Average percentage breakdown for all cases (n = 31 states)	27 (7.7)	17 (10.7)	45 (13.2)	7 (7.6)	8 (8.5)
Breakdown for reported cases only (n = 12 states)	33 (7.0)	14 (5.0)	48 (9.7)	4 (3.1)	5 (5.4)
Breakdown for substantiated cases only (n = 19 states)	24 (6.1)	19 (12.7)	43 (14.9)	10 (8.7)	11 (10.2)

* Total percentages may add to more than 100 as they are based on state averages.

^b Excludes Arizona which classified 52% of reports as "other" and North Carolina (neglect accounts for 90% of cases).

^c In many cases "other" includes abandonment and dependency.

finding suggests that investigated reports of physical abuse are less likely to be substantiated than reports of emotional maltreatment. The reasons for these patterns are unclear. On the one hand they might reflect a tendency for individuals to report any suspected physical abuse while not reporting emotional maltreatment without proof of consistent wrongdoing on the part of the perpetrator. On the other hand, child protective services may be more likely to investigate any report of physical abuse while only investigating reports of more severe forms of emotional maltreatment.

Day Care/Foster Care

Reports of child maltreatment involving day care centers and foster care homes attract a great deal of attention from the media and the general public. Such publicity has created the perception that abuse is common place in these out-of-home settings. However, this perception seems out of line with reality (Finkelhor, Williams & Burns, 1988). According to the 17 states that provided this statistic for 1992, reports of abuse in out of home settings represented less than 6% of all reports. For both day care and foster care, such allegations account for less than 1% of all reports. These figures have been consistent over the past six years.

To address the fears caused by this perception as well as prevent future maltreatment, at least 26 states have created some type of registry of convicted or substantiated offenders which can be accessed by others outside of the child protective service system. In most cases, these registries enable day care operators and others in state agencies to screen prospective employees for a history of child maltreatment. A similar registry has been proposed at the federal level to prevent offenders from crossing state lines to gain employment in child-related fields.

Abandonment

Recently, the abandonment of children has garnered national coverage as a result of an Illinois couple, the Schoo's, leaving their two children unsupervised while they vacationed in Mexico for a week. In an effort to find out how often such situations occurred, we asked most state liaisons whether they keep track of abandonment cases, how many were reported in the last year and whether the state had specific guidelines to determine abandonment or lack of supervision.

Of the 23 states collecting data on abandonment, 18 provided figures for either 1991 or 1992. To maximize the data, we used the average for states providing data for both years and combined the remaining figures. During 1991 and 1992, at least 4,696 children were reported for abandonment by these 18 states. Many states noted that the incidence of abandonment was so rare that the data collection system does not capture these cases as a separate category. Instead, these cases are typically included under

neglect or lack of supervision.

Twenty states have established guidelines for determining abandonment or lack of supervision. At least six of these states include specific age requirements as part of the policy. In Oregon, it is illegal to leave a child unsupervised if the child is under the age of ten. In Maryland, a child under eight years old must be supervised by someone at least 13 years of age. The Maryland Department of Social Services will accept referrals for children twelve and under who are left alone. Kentucky considers a child aged eight or under to be at imminent risk if left without adult supervision. Children ages twelve or under who are left unsupervised for over two to three hours can be reported in California. Louisiana also has specific age criteria if a child is left to supervise other children. The majority of states, however, use more flexible guidelines which take into account the maturity of the child, the time left alone and other relevant factors.

Primary Presenting Problems

Families reported for child maltreatment often display a number of problems which can contribute to their likelihood for engaging in abusive behavior. Identifying these problems is a first step toward prevention. To assess whether specific patterns are shared by families on CPS caseloads across the country, respondents were asked to describe the major problems presented by their caseloads. Forty-six state liaisons responded to this question with 70% (32 states) naming **substance abuse** as one of the top two problems. Montana, New York and Texas emphasized that alcohol abuse was the most prominent problem among families on their caseloads. In Illinois, increased substance abuse has led to the practice of parents dumping their children with relatives for long periods of time.

The next most frequent response involved issues surrounding **economic stress**. Forty-eight percent (22 states) indicated that most families on their caseloads either lived in poverty or faced increased financial stress due to unemployment and the recession. These families have insufficient resources to care for their children. In Alabama, for example, low incomes coupled with the need for both parents to work has resulted in many families leaving children unsupervised.

Three other problems were noted by a significant portion of states. Seventeen percent (8 states) identified **family or domestic violence** as a primary difficulty for their families. The South Carolina respondent stated that family violence has produced more dysfunctional families entering the system with more damaged children. Eight states also asserted that lack of knowledge of child care and development, lack of parenting skills and inappropriate child management techniques characterized many of their families. Finally, 11% (5 states) mentioned the lack of community support for families as a major impediment in the lives of these people.

Child Maltreatment Fatalities

One of the greatest tragedies is the death of a child from abuse or neglect. In this survey, state liaisons were asked to provide both the number of reported and confirmed child abuse deaths between 1990 and 1992. The numbers presented in Table 3 represent confirmed child abuse and neglect fatalities for all years with the exception of the 1992 statistics from Arkansas and Montana. These two states provided reported numbers for that year. As eight states have some number of 1992 deaths still under investigation, their figures represent preliminary counts of fatalities. The 1992 estimate in Table 3 is based on data from 36 states comprising 68.9% of the U.S. population under eighteen years of age. Estimates for earlier years are based on at least 85% of the child population. If data were available from all 50 states and the District of Columbia for all eight years, the actual rate of change and total scope of the problem could vary somewhat from these projections.

Though such deaths are relatively infrequent, the rate of child maltreatment fatalities has risen steadily over the past seven years. Table 3 presents the estimated number of fatalities from 1985 to 1992. During this period, the rate of fatalities increased from 1.3 per 100,000 children in 1985 to 1.94 per 100,000 in 1992, a 49 percent rise. In 1992, an estimated 1,261 children died from abuse or neglect. This means that more than three children die each day in the U.S. as a result of maltreatment. While this increase partially reflects changes in reporting and documentation procedures, the pattern is comparable to trends in child homicides. According to the National Center on Health Statistics (NCHS), the homicide rate for children under one year-old rose 55% between 1985 and 1988, climbing from 5.3 per 100,000 children to 8.2 per 100,000 children (NCHS, 1990).

The less than 1.0% increase in the fatality rate between 1991 and 1992 is much lower than the 8.4% increase which occurred between 1990 and 1991. This apparent stability, however, should be viewed with caution as 16 states did not provide the number of child maltreatment fatalities for 1992. Of those who did, 15 states had an increase, 19 states showed a decline and two states had no change in the number of fatalities between 1991 and 1992.

To gain an understanding of the causes behind the overall increase, we asked each state liaison to list the two most significant factors accounting for the change in the number of fatalities. The responses indicate that unique or unknown variables appear to govern changes in the number of fatalities reported in a given state. Of the 17 states with an increase who responded to this question, 41% (8 states) attributed the change to **more accurate counting of fatalities**. Other factors included **increased substance abuse** (7 states), the presence of a non-related male caretaker (4 states), public awareness (2 states) and economic stress (2 states). States with a decrease between 1991 and 1992 showed no consensus on this question. Overall, it appears that an

Table 3
CHILD ABUSE AND NEGLECT RELATED FATALITIES

State	1985	1986	1987	1988	1989	1990	1991	1992
Alabama *	NA	NA	NA	NA	NA	14	17	NA
Alaska	NA	NA	1	1	1	0	2	0
Arizona *	NA	NA	NA	13	14E	14	12	13
Arkansas	9	6	5	10	14	9	7	10R
California	18	27	83	120	97	78	100	69P
Colorado	12	18	18	26	23	31	30	32P
Connecticut	6	9	NA	6	6	17	11	10
Delaware	2	1	NA	1	4	1	3	NA
Dist. of Columbia	NA	2	5	9	NA	NA	NA	NA
Florida *	NA	47	43	48	47	53	50	44
Georgia	NA	NA	NA	4	5	12	13	NA
Hawaii	1	1	2	2	7	2	5	3
Idaho	5	3	6	3	6	4	6	3
Illinois	53	79	54	98	102	75	92	75P
Indiana	29	38	17	27	29	52	48	49
Iowa	9	7	14	13	9	9	15	9P
Kansas	9	12	12	7	6	10	4	6
Kentucky	10	9	16	15	8	20	17	24
Louisiana	50	57	30	31	20	28	36	25P
Maine	0	1	3	1	NA	6	6	5
Maryland	8	17	23	20	29	16	38	31
Massachusetts	13	15	13	25	13	16	9	NA
Michigan	11	15	NA	NA	NA	NA	NA	NA
Minnesota	6	10	7	9	13	14	13	NA
Mississippi	NA	7	14	10	14	12	24	13P
Missouri	25	18	19	28	20	26	40	46
Montana *	2	3	7	2	6	7	8	5R
Nebraska	2	2	2	5	1	2	4	2
Nevada	6	4	7	5	NA	1	7	NA
New Hampshire	NA							
New Jersey	21	12	26	34	30	38	17	17P
New Mexico *	10	7	11	8	13	8	6	4
New York *	63P	126P	102P	125	106	105P	106P	NA
North Carolina	4	3	6	6	7	30	30	51
North Dakota	0	0	1	0	1	0	0	0

State	1985	1986	1987	1988	1989	1990	1991	1992
Ohio	37	50	75	NA	61	52	76	81
Oklahoma	16	24	31	23	25	18	38	20
Oregon	8	18	24	17	19	14	14	21
Pennsylvania *	34	44	44	40	55	58	60	N
Rhode Island	5	4	4	0	NA	4	8	
South Carolina	21	25	13	11	14	21	21	28
South Dakota	4	2	10	2	1	2	1	
Tennessee	NA	NA	NA	NA	NA	NA	NA	N
Texas	113	129	97	77	94	112	97	101
Utah	8	3	4	5	12	12	10	11
Vermont	1	1	2	0	0	0	2	
Virginia	14	14	27	25	34	28	34	33
Washington	27	37	24	21	8	8	16	DNR
West Virginia	NA	NA	NA	NA	3	1	3	DNR
Wisconsin	10	9	18	11	23	16	17	N
Wyoming	3	3	0	5	3	4	2	
Total Fatalities	685	919	920	949	1003	1060	1176	86
% of Child Population Under 18	85.1	90.6	85.6	86.8	90.9	92.7	93.7	68
Total Projected Fatalities Nationwide	805	1014	1074	1093	1103	1143	1255	12
Per 100,000 Children	1.3	1.6	1.68	1.71	1.72	1.78	1.93	1.
% Change from previous year		23.1%	5.0%	1.8%	0.6%	+3.5%	8.4	0

P Not final #'s as some cases are still pending.

NA Not Available

DNR Did not respond to survey

R Reported Fatalities only

* These states only collect information on deaths due to abuse.

individual state's reported fatalities show great fluctuation from year to year. A more accurate assessment of change would be the pattern observed in a given state over a period of years. Unfortunately, in many states this is a pattern of increased deaths.

To better understand how and why child abuse fatalities occur, we examined four characteristics of these deaths for the past three years: 1) involvement of the victim with CPS agencies, 2) type of maltreatment leading to death, 3) the ages of the child victims and 4) the involvement of parental substance abuse. Table 4 presents the results. Overall, 35% of the children who died between 1990 and 1992 had prior or current contact with CPS agencies. This substantial percentage may reflect the fact that many states only investigate deaths of children with current or prior CPS contact, thereby ensuring that a high percentage of the reported deaths will involve such children.

At least 23 states were able to report the type of maltreatment which caused the child's death. These percentages remained fairly stable over the years. Between 1990 and 1992, 37% died from neglect, 59% died from abuse while 5% died as a result of both forms of maltreatment. These percentages, however, differ from previous studies which found that neglect resulted in more deaths than abuse (AAPC, 1988). One possible reason for this difference may be that eight of these states (Alabama, Arizona, Florida, Michigan, Montana, New Mexico, New York and Pennsylvania) did not provide or collect data on deaths due to neglect.

Young children remain at high risk for loss of life. Based on data from all three years, this study found that 87% of these children were under the age of five while an alarming 46% were under the age of one at the time of their death. In 1992, the rate of fatalities for children under five was 5.7 per 100,000 children; for children under one, 14.5 per 100,000 children. These numbers correspond with other studies (AAPC, 1988) and emphasize the vulnerability of young children to child abuse and neglect. Lastly, parental substance abuse was linked to 19% of these deaths. However, this statistic is based on data from 13 states which restricts its reliability as a national average.

It should be noted that these figures undercount the actual incidence of maltreatment fatalities in the United States. Research has consistently found that some percentage of accidental deaths, child homicides, and Sudden Infant Death Syndrome (SIDS) cases might be more appropriately labeled a child maltreatment death if comprehensive investigations were routinely conducted (Mitchel, 1987; California Office of the Auditor General, 1988). Additionally, the inclusion of deaths due to neglect would increase these totals.

Death Review Committees

Whether a state has a death review committee and that

Table 4
Breakdown of Child Maltreatment Fatalities

	1990 %	1991 %	1992 %	Total %
Prior or Current Contact with CPS	33% (n=25)	35% (n=26)	38% (n=24)	35%
Deaths Due to Neglect	38% (n=32)	37% (n=32)	36% (n=23)	37%
Deaths Due to Abuse	57% (n=32)	60% (n=32)	58% (n=23)	58%
Deaths Due to Neglect and Abuse	5% (n=32)	3% (n=32)	6% (n=23)	5%
Deaths to Children Under Five Years	88% (n=32)	90% (n=33)	84% (n=26)	87%
Deaths to Children Under One Year	45% (n=30)	50% (n=32)	43% (n=25)	46%
Deaths Involving Parental Substance Abuse	15% (n=13)	17% (n=13)	25% (n=11)	19%

committee's function also influence the ability of CPS to provide an accurate count of fatalities. According to this survey, 32 states (63%) have some type of death review committee in place.⁴ The number of deaths reviewed by these committees varied. For all 17 states which could provide this number, 1,558 child deaths were reviewed in 1992. The bulk of these came from four states: Colorado (700), Georgia (350), Missouri (172) and Maryland (150). The majority of committees only investigate the deaths of children with previous or current CPS involvement, or deaths which are reported to CPS agencies as due to abuse or neglect. Since 1991, 14 states have revised or implemented new procedures with the majority expanding the investigative responsibilities of the death review committees. The American Bar Association's Center on Children and the Law in conjunction with the American Academy of Pediatrics recently completed an extensive investigation of these committees and has proposed model legislation for creating death review committees (Anderson & Wells, 1991; Kaplan, 1991).

Substance Abuse

As noted earlier, the majority of states cited substance abuse as a major presenting problem of families on their caseloads. The increased use of drugs and alcohol by caregivers also was noted by 11 states as a primary factor in driving up reporting levels. In this survey, we sought to identify ways in which states and CPS agencies have responded to this epidemic. First, we asked states if they routinely collected information regarding the family's history of substance abuse. While 23 out of 49 liaisons (47%) responded in the affirmative, only 13 of these states had created specific criteria to determine this history. In addition, this information is only available to the caseworker and is not compiled at the state level in most of these states. Only seven states provided an estimate of the number of substantiated cases involving substance abuse. On average, 30% of the substantiated cases in these states involved substance abuse though the percentage ranged from 3% to 80%.

One well-known result of increased substance abuse by women is the growing number of infants born exposed to illegal substances taken by their mother during pregnancy. Estimates on the scope of this problem vary substantially from 100,000 to 350,000 infants nationwide (Chicago Tribune, 1991; Chasnoff, 1988). In 1992, 13 states reported a total of 5,502 drug-exposed infants. Only Virginia, however, stated that the uniform testing of infants for drug-exposure is required. Several states have responded to this problem by mandating that medical personnel and others report to CPS drug-exposed infants or substance abusing pregnant women. As of 1992, 22 states require the reporting of drug-exposed babies while four states (District of Columbia, Idaho, Massachusetts and Minnesota) mandate the reporting of pregnant substance abusers.

Previous studies have shown that substance abuse treatment programs with in-patient facilities are sparse while residential treatment programs housing children in addition to the mother are

almost non-existent (Jones & Ackatz, 1992). To determine how CPS agencies have addressed the substance abuse problem, we asked the state liaisons about specific programs or policies around this issue. Twenty of the 45 responding states (44%) have launched some type of response. Many these responses, however, have been limited to creating new policies on referrals of drug-exposed babies or developing stronger referral networks with other state and local agencies regarding substance abusing pregnant women.

Several states did describe innovative programs. In California, the Department of Social Services operates 14 perinatal substance abuse prevention and intervention projects. At least four states received money from National Center on Child Abuse and Neglect (NCCAN) to address the problem of substance abuse and child abuse. A pilot project in Denver County, Colorado provides case aides and outreach services to these populations. In North Carolina, federal money is being used to develop curricula for training staff to understand and work with substance-abusing parents who maltreat their children. South Carolina received a grant to provide intensive treatment of substance abusers. This state also opened a new residential treatment facility for women and children. Lastly, Vermont is participating in a three-year federal demonstration project for dysfunctional families with children at risk of placement. Called SAFE (Substance Abuse Family Emergency), it provides substance abuse counseling and family services within the client's home for up to three months.

Other interesting programs include the use of Title IVB monies to purchase substance abuse treatment for CPS families in Texas. Oregon runs a program which provides parenting classes, substance abuse treatment, housing, child care and medical care for substance-abusing parents who maltreat their children. New Jersey has established some specialized homes for drug-exposed babies who have been abandoned. Nevada also has received funding for working with drug-exposed, abandoned infants. Maryland provides services to substance-abusing pregnant adolescents while Illinois has added 10 sites to Project SAFE which provides intensive treatment and parenting education to substance-abusing women. Hawaii, Minnesota and Mississippi also provide services to these populations.

Child Welfare Services

The ability of the child welfare systems to respond to the continued increase in reports and child abuse fatalities largely depends on the resources available. The amount of funding CPS agencies receive dictates whether reports get investigated, victims receive services or efforts are made to prevent maltreatment before a family enters the system. In this section, we investigate not only changes in child welfare budgets, but the existence of new programs designed to prevent child abuse.

While the burden on the CPS system increases each year as shown by higher numbers of reports, the majority of states either received level funding or a cost of living increase which

prohibited staff or service enhancements. Of the 48 states who provided funding information, 13 (27%) received an increase⁶ in their 1992 child welfare budgets, 5 states (10%) experienced cuts while 30 states (63%) reported no change in funding. Increases were utilized to hire more staff or provide more services. In Connecticut and the District of Columbia, these increases were the result of lawsuits filed against the child welfare agency. The five states with a decline were Hawaii, Iowa, New Jersey, Tennessee and Wyoming. In most cases, these were across the board cuts as part of a state mandate to balance the budget. Six states (Iowa, Kentucky, New Jersey, Oklahoma, South Carolina and Tennessee) also faced hiring freezes which resulted in fewer services and higher caseloads as empty positions could not be filled.

To identify comprehensive prevention programs, respondents were asked whether their state provided any intensive home visiting services to at-risk mothers of newborns. Twenty state liaisons indicated that some type of home visiting program was available. At least three of these programs were funded by that state's Children's Trust Fund while six were provided by the state's Department of Health. Wyoming has 14 sites in existence. Utah has mandated the implementation of Healthy Utah by July, 1993. An additional nine states reported that legislative efforts are underway to create this type of prevention services.

Finally, this survey explored whether CPS agencies provided training to staff on cultural competency. Of the 49 responding states, 73% (36 states) provided specific training on issues of cultural competency within the previous year. In 20 states, this training was provided to all workers, usually on a voluntary basis. An additional nine states trained all new workers, largely on a mandatory basis.

CONCLUSION

Child abuse reports continue to climb at a steady rate, apparently fueled by increasing economic stress and substance abuse as well as greater public awareness of and willingness to report maltreatment. Unfortunately, the CPS system appears unable to cope with the increased demands placed upon it. Despite the large increases in caseloads, most states received no increase in funding for child protective services. In effect, these agencies were asked to serve more people with the same amount of resources. As this survey found, such constraints affect the entire system by limiting services to victims and their families, increasing screening of reports and restricting efforts to prevent fatal maltreatment of children known to CPS agencies.

States have achieved some gains. Several CPS agencies have initiated innovative programs to address the connection between substance abuse and child abuse. In addition, a number of states have created home visiting services for at-risk families. Almost all states have established Children's Trust Funds to provide funding for prevention programs. This survey, however, identified

several critical shortcomings in the current child welfare system. The following policy implications result from this study:

- o The level of funding for child protective services needs to be responsive to the increasing caseload.
- o CPS agencies need to collect and disseminate better information on services to victims and their families. More importantly, it appears that a decreasing number of these cases are receiving needed services. Identifying a case of maltreatment without providing any assistance to the family represents a disservice to the victim, family and the general public.
- o Reports of neglect consistently represent the bulk of child maltreatment reports. In addition, neglect can be as lethal as abuse. State and federal agencies need to direct more resources toward the treatment and prevention of this type of maltreatment.
- o Young children are the most likely to die from child abuse and neglect. Prevention efforts need to be focused toward parents of young children, particularly those parents already known to CPS agencies.
- o The limited amount of information on the extent of the alcohol and drug abuse problem of families involved with CPS agencies means that state CPS administrations cannot base policy or programmatic decisions on accurate information. To create an effective response, such data must be collected.
- o The findings from this survey show that while some headway has been made in addressing the connection between substance abuse and child abuse, much needs to be done. Without substance abuse treatment for addicted pregnant women and maltreating parents, attempts to prevent or alter abusive or neglectful behavior are likely to fail.
- o The continued growth in reports and failure to reduce the number of child maltreatment fatalities clearly indicate that the present system is failing. States need to move beyond protection and invest in comprehensive child abuse prevention programs. To this end, states should increase the availability of supportive services for overburdened families and those at risk of having a child removed from the home.

Endnotes

1. In 1989, the federal government established the National Child Abuse and Neglect Data System (NCANDS) which is a voluntary data collection and analysis system on child maltreatment. NCANDS is designed to collect summary and case level data from all states on an annual basis. NCANDS first report is entitled Working Paper 1: 1990 Summary Data Component, (April, 1992).
2. The rates for reports and fatalities between 1985 and 1989 are based upon population estimates from U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1058, State Population and Household Estimates: July, 1989, U.S. Government Printing Office, Washington, DC, 1990. The rates for 1990 to 1992 are based upon population estimates from U.S. Bureau of the Census, Statistical Abstract of the United States: 1992 (112th Edition), Washington, DC, 1992.
3. Several states updated their reporting figures for 1990 and 1991. This survey reflects these revisions. As a result, the annual percentage change and total estimated child reports for these years differ from the figures published in the 1991 annual fifty state survey. The more recent statistics have greater reliability. To calculate the estimated number of reported child victims between 1987 and 1991, we take the last actual count of child victims conducted in 1986 by AAPC (1988) and multiply by the average state percentage change in reports. For example, in 1986 there were 2,086,000 children reported for maltreatment. This number multiplied by 1.03 (representing the 3% increase in reports between 1986 and 1987) equals 2,157,000, the estimated number of children reported in 1987.
4. States with some type of death review committee include Alaska, Arkansas, California, Colorado, District of Columbia, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Minnesota, Missouri, New Hampshire, New Jersey, New Mexico, North Carolina, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont and Wyoming.
5. These states requiring the reporting of drug-exposed babies are Colorado, Delaware, District of Columbia, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Massachusetts, Minnesota, Nevada, New Hampshire, Oklahoma, Oregon, Rhode Island, South Carolina, Texas, Utah and Wisconsin.

6. The thirteen states with an increase in funding are Arkansas, California, Connecticut, D.C., Illinois, Kansas, Nebraska, North Carolina, Ohio, Pennsylvania, Rhode Island, Texas and Virginia.

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SECOND REGULAR SESSION
HOUSE BILL NO. 1251
87TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES STEINMETZ (Sponsor), BOUCHER,
OSTMANN, SALLEE AND SCHILLING.

Read 1st time January 11, 1994 and 1000 copies ordered printed.

2010-2

DOUGLAS W. BURNETT, Chief Clerk

AN ACT

To repeal sections 210.110, 210.166, 210.180, 210.183, 210.186
and 210.189, RSMo 1986, and sections 210.115, 210.145,
210.150, 210.152 and 590.105, RSMo Supp. 1993, relating
to the protection of certain children, and to enact in
lieu thereof thirteen new sections relating to the same
subject.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 210.110, 210.166, 210.180,
2 210.183, 210.186 and 210.189, RSMo 1986, and sections
3 210.115, 210.145, 210.150, 210.152 and 590.105, RSMo
4 Supp. 1993, are repealed and thirteen new sections
5 enacted in lieu thereof, to be known as sections 210.005,
6 210.109, 210.110, 210.115, 210.145, 210.150, 210.152,
7 210.153, 210.166, 210.180, 210.183, 211.180 and 590.105,
8 to read as follows:

210.005. The purpose of this chapter is to
2 facilitate the care and protection of children and
3 families. This chapter shall be liberally construed
4 to protect the best interests of the child and the
5 family unit.

EXPLANATION—Matter enclosed in bold faced brackets [thus] in this bill is
not enacted and is intended to be omitted in the law.

210.109. 1. By January 1, 1994, the division of
2 family services shall establish a child protection
3 system in at least five areas of the state selected
4 by the division. By January 1, 1999, the child
5 protection system shall be implemented throughout
6 the state.

7 2. By January 1, 1997, the division of family
8 services shall submit documentation to the speaker
9 of the house of representatives and the president
10 pro tem of the senate on the success or failure of
11 the child protection system established in this
12 section.

210.110. As used in sections [210.110] 210.109 to
2 210.165, [unless the context clearly indicates otherwise,]
3 and sections 210.180 to 210.183, the following terms
4 mean:

5 (1) "Abuse", any physical injury, sexual abuse, or
6 emotional abuse inflicted on a child other than by
7 accidental means [by those responsible for his care,
8 custody, and control], except that discipline including
9 spanking, administered in a reasonable manner shall not
10 be construed to be abuse;

11 (2) "Central registry", a registry of persons
12 where the division has found credible evidence to
13 believe or a court has substantiated through court
14 adjudication that the individual has committed
15 child abuse or neglect or the person has pled guilty
16 or has been found guilty of a crime where the victim
17 of the crime was a child;

18 [(2)] (3) "Child", any person, regardless of physical
19 or mental condition, under eighteen years of age;

20 (4) "Credible evidence to believe", available
21 facts when viewed in the light of surrounding

22 circumstances which would cause a reasonable
23 person to believe a child was abused or neglected;
24 [(3)] (5) "Director", the director of the Missouri
25 division of family services;
26 [(4)] (6) "Division", the Missouri division of family
27 services;
28 (7) "Family assessment and services", an
29 approach to be developed by the division of family
30 services which will provide for a prompt assess-
31 ment of a child who has been reported to the
32 division as a victim of abuse or neglect by a person
33 responsible for that child's care, custody or control
34 and of that child's family, including risk of abuse
35 and neglect and, if necessary, the provision of
36 community based services to reduce the risk and
37 support the family;

38 (8) "Investigation", the collection of physical
39 and verbal evidence to determine if a child has been
40 abused or neglected;

41 [(5)] (9) "Neglect", failure to provide, by those
42 responsible for the care, custody, and control of the child,
43 the proper or necessary support, education as required
44 by law, nutrition or medical, surgical, or any other care
45 necessary for [his] the child's well-being; [and]

46 (10) "Report", the initial communication of an
47 allegation of child abuse or neglect to the division
48 pursuant to section 210.115;

49 [(6)] (11) "Those responsible for the care, custody,
50 and control of the child", those included but not limited
51 to the parents or guardian of a child, other members of
52 the child's household, or those exercising supervision
53 over a child for any part of a twenty-four hour day.

210.115. 1. When any physician, medical examiner,

2 coroner, dentist, chiropractor, optometrist, podiatrist,
3 resident, intern, nurse, hospital [and] or clinic personnel
4 (engaged in examination, care, or treatment of persons),
5 and other health practitioner, psychologist, mental
6 health professional, social worker, day care center worker
7 or other child care worker, juvenile officer, probation or
8 parole officer, teacher, principal or other school official,
9 Christian Science practitioner, peace officer or law
10 enforcement official, or other person with responsibility
11 for the care of children, has reasonable cause to suspect
12 that a child has been or may be subjected to abuse or
13 neglect or observes a child being subjected to conditions
14 or circumstances which would reasonably result in abuse
15 or neglect, [he] that person shall immediately report
16 or cause a report to be made to the division in accordance
17 with the provisions of sections 210.110 to 210.165. [As
18 used in this section, the term "abuse" is not limited to
19 abuse inflicted by a person responsible for his care,
20 custody and control as specified in section 210.110, but
21 shall also include abuse inflicted by any other person.]

22 2. Whenever such person is required to report under
23 sections 210.110 to 210.165 in [his] an official capacity
24 as a staff member of a medical institution, school facility,
25 or other agency, whether public or private, the person
26 in charge or [his designee] a designated agent shall
27 be notified immediately. The person in charge or [his
28 designee] a designated agent shall then become
29 responsible for immediately making or causing such
30 report to be made to the division. Nothing in this section,
31 however, is meant to preclude any person from reporting
32 abuse or neglect.

33 3. [Notwithstanding any other provision of sections
34 210.110 to 210.165, any child who does not receive

35 specified medical treatment by reason of the legitimate
36 practice of the religious belief of the child's parents,
37 guardian, or others legally responsible for the child, for
38 that reason alone, shall not be considered to be an abused
39 or neglected child; however, such an exception shall not
40 preclude a court from ordering that medical services be
41 provided to the child when his health requires it.

42 4.] In addition to those persons and officials required
43 to report actual or suspected abuse or neglect, any other
44 person may report in accordance with sections [210.110
45 to 210.165] 210.109 to 210.183 if such person has
46 reasonable cause to suspect that a child has been or may
47 be subjected to abuse or neglect or observes a child being
48 subjected to conditions or circumstances which would
49 reasonably result in abuse or neglect.

50 [5.] 4. Any person or official required to report under
51 this section, including employees of the division, who
52 has reasonable cause to suspect that a child who is or
53 may be under the age of fifteen has died shall report
54 that fact to the appropriate medical examiner or coroner.
55 The medical examiner or coroner shall accept the report
56 for investigation and shall report [his] the findings to
57 the child death review team established pursuant to
58 section 210.192.

59 [6.] 5. Any person or official required to report under
60 this section, including employees of the division, who
61 has reasonable cause to suspect that a child between the
62 ages of fifteen and eighteen years of age has died as
63 a result of abuse or neglect shall report that fact to the
64 appropriate medical examiner or coroner. The medical
65 examiner or coroner shall accept the report for inves-
66 tigation and shall report [his] the findings to the police
67 or other peace officer, the juvenile officer, the prosecuting

68 attorney, the division, and if the institution making the
69 report is a hospital, to the hospital.

70 [7.] 6. Any person or individual required to report
71 may also report the suspicion of abuse or neglect to any
72 law enforcement agency or juvenile office. Such report
73 shall not, however, take the place of reporting or causing
74 a report to be made to the division.

210.145. 1. The division shall establish and main-
2 tain a [telephone service] information system operat-
3 ing at all times, capable of receiving and maintaining
4 reports [made pursuant to sections 210.110 to 210.165].
5 This [service] information system shall have the
6 ability to receive reports over a single, statewide toll
7 free number. Such information system shall main-
8 tain the results of all investigations, family
9 assessments and services, and other relevant
10 information.

11 2. [The division shall maintain a central registry
12 capable of receiving and maintaining reports received
13 pursuant to sections 210.110 to 210.165, in a manner that
14 facilitates rapid access and recall of the information
15 reported, and of subsequent investigations and other
16 relevant information. From January 1, 1987, to January
17 1, 1988, the division shall electronically record any
18 telephone report received by the division pursuant to
19 sections 210.110 to 210.165. Such recorded reports shall
20 be retained by the division for a period of one year after
21 recording.

22 3.] Although reports [to the central registry] may be
23 made anonymously, the division shall in all cases, after
24 obtaining relevant information regarding the alleged
25 abuse or neglect, attempt to obtain the name and address
26 of any person making a report [pursuant to sections

27 210.110 to 210.165].

28 3. Upon receipt of a report, in all areas in which
29 a child protection system has been implemented,
30 the division shall forward the report to the
31 appropriate division staff who shall determine
32 whether an investigation or the family assessment
33 and services approach should be used to respond
34 to the allegation, except that the division shall
35 conduct an investigation involving reports, which
36 if true, would constitute a violation of section
37 565.156, RSMo, chapter 566, RSMo, section
38 567.050, RSMo, section 568.050, 568.060 or
39 568.070, RSMo;

40 4. Upon receipt of a report [pursuant to sections
41 210.110 to 210.165], the division shall immediately
42 communicate such report to its appropriate local office,
43 [communication to be by telephone] after a check has
44 been made with the [central registry] information
45 system to determine whether previous reports have been
46 made regarding actual or suspected abuse or neglect of
47 the subject child, of [his] any siblings, and the
48 perpetrator, and relevant dispositional information
49 regarding such previous reports. Such relevant informa-
50 tion as may be contained in the [central registry]
51 information system shall be also reported to the local
52 office of the division.

53 5. Upon receipt of a report [pursuant to sections
54 210.110 to 210.165], which, if true, would constitute
55 violation of [section 568.060,] section 565.165, RSMo,
56 chapter 566, RSMo, section 567.050, RSMo, section
57 568.050, 568.060 or 568.070, RSMo, the local office
58 shall contact the appropriate law enforcement agency
59 and provide such agency with a detailed description of

60 the report received. In such cases the local division office
61 shall request the assistance of the local law enforcement
62 agency in all aspects of the investigation of the
63 complaint. [The local division office making such a
64 request shall within a reasonable time report in writing
65 the following information to the local prosecuting or
66 circuit attorney:

67 (1) The name of the division employee who contacted
68 the law enforcement agency;

69 (2) The law enforcement agency contacted;

70 (3) The name of the officer or employee of the law
71 enforcement agency which was contacted;

72 (4) The time, date, and form of the request for
73 assistance;

74 (5) A general description of the facts of the reported
75 abuse or neglect which were related to the law enforce-
76 ment agency in the request; and

77 (6) The response of the local law enforcement agency
78 to the request. The report to the prosecuting or circuit
79 attorney shall not include the names of the complainant,
80 the alleged perpetrator or the suspected victim, but may
81 contain nonidentifying information regarding those
82 persons. A copy of the report made to the prosecuting
83 or circuit attorney shall be sent to the state office of the
84 division. Such report shall be a public record available
85 for inspection upon reasonable request during regular
86 business hours.] **The appropriate law enforcement**
87 agency shall assist the division in the investigation
88 or provide the division, within a reasonable time,
89 an explanation in writing detailing the reasons
90 why it is unable to assist.

91 6. The local office of the division shall cause a
92 thorough investigation or family assessment and

93 services approach to be initiated [immediately or no
94 later than] within twenty-four hours of receipt of the
95 report from the division, except in cases where the sole
96 basis for the report is educational neglect. If the report
97 indicates that educational neglect is the only complaint
98 and there is no suspicion of other neglect or abuse, the
99 investigation or family assessment and services
100 approach shall be initiated within seventy-two hours
101 of receipt of the report. If the report indicates the child
102 is in danger of serious physical harm or threat to life,
103 an investigation or family assessment and services
104 approach shall include direct observation of the subject
105 child within twenty-four hours of the receipt of the report.

106 7. If the division investigates the report, the
107 investigation shall include but not be limited to the
108 nature, extent, and cause of the abuse or neglect; the
109 identity and age of the person responsible therefor; the
110 names and conditions of other children in the home, if
111 any; the home environment and the relationship of the
112 subject child to the parents or other persons responsible
113 for [his] the child's care; any indication of incidents
114 of physical violence against any other household
115 or family member; and other pertinent data.

116 8. If the family assessment and services
117 approach is used, the division shall complete a
118 preliminary assessment of risk during the initial
119 contact with the family and identify the need for
120 any immediate services. The assessment of risk
121 and service needs shall be based on information
122 gathered from the family and other sources;

123 9. Services provided under the family assess-
124 ment and services approach shall be voluntary and
125 time-limited unless it is determined by the division

126 based on the assessment of risk that there will be
127 a high risk of abuse or neglect if the family refuses
128 to accept the services;

129 10. The division shall thoroughly document in
130 the record its attempt to provide voluntary services
131 and the reasons these services are important to
132 reduce the risk to the child. If the family continues
133 to refuse voluntary services, the division shall
134 provide this information to the juvenile officer. If
135 in the judgment of the juvenile officer, services are
136 necessary to protect the child, he shall request that
137 services be ordered by the court;

138 11. If at any time during the family assessment
139 and services approach the division determines that
140 an investigation as delineated in sections 210.109
141 to 210.183 is required, then an immediate referral
142 to the investigative staff of the division shall be
143 made. The division staff who have conducted the
144 assessment may remain involved in the provision
145 of services to the child and family;

146 12. The division shall document at the time the
147 case is closed, the outcome of the family assessment
148 and services approach, any service provided and
149 the removal of risk to the child, if it existed;

150 13. Assure that all children that come to the
151 attention of the division who are at risk of out-
152 of-home placement are screened for family preser-
153 vation services prior to or within seventy-two
154 hours after placement. The provision of this
155 service by the division of family services shall be
156 dependent upon the appropriation of sufficient
157 funds by the general assembly.

158 14. Reports initially referred for an investiga-

159 tion may at any time during the investigation be
160 referred for a family assessment and services
161 approach if it is determined that a complete
162 investigation is not required. If law enforcement
163 officers are involved in the investigation they shall
164 provide written agreement with this decision. The
165 reason for the termination of the investigative
166 process shall be documented in the record.

167 15. If, at any time during the investigation, it
168 is determined that the child or any member of the
169 family needs services, the division shall assist the
170 child and family in obtaining those services.

171 16. The division shall collaborate with the
172 community to identify comprehensive local servi-
173 ces and assure access to those services for children
174 and families where there is risk of abuse or neglect.

175 17. When a report has been made by a person
176 required to report under section 210.115, [the local office
177 of the] division shall contact the person who made such
178 report within forty-eight hours of the receipt of the report
179 in order to ensure that full information has been received
180 and to obtain any additional information or medical
181 records, or both, that may be pertinent.

182 [7.] 18. Upon completion of the investigation or
183 family assessment if the [local office of the] division
184 suspects that the report [made pursuant to sections
185 210.110 to 210.165] was made maliciously or for the
186 purpose of harassment, the [local] division [office] shall
187 refer the report and any evidence of malice or harassment
188 to the local prosecuting or circuit attorney.

189 [8.] 19. Protective or preventive social services
190 shall be provided by the [local office of the] division to
191 the family and subject child and to others in the home

192 to prevent [further] abuse or neglect, to safeguard their
193 health and welfare, and to help preserve and stabilize
194 the family whenever possible. The juvenile court shall
195 cooperate with the division in providing such services.

196 [9.] 20. Multidisciplinary services shall be [utilized]
197 used whenever possible in [making] conducting the
198 investigation or family assessment and in providing
199 protective or preventive social services, including the
200 services of law enforcement, the juvenile officer, the
201 juvenile court, and other agencies, both public and
202 private. The division shall cooperate with [the highway
203 patrol] law enforcement agencies and juvenile courts
204 to develop training programs to increase the ability of
205 division personnel, juvenile officers and law enforcement
206 officers to investigate suspected cases of abuse and
207 neglect. The division shall assist in identifying
208 pertinent training on child abuse and neglect in
209 order for law enforcement to meet the require-
210 ments of section 590.105, RSMo.

211 [10. As a result of its investigation, the local office
212 of the division shall report a child's injuries or disabilities
213 from abuse or neglect to the juvenile officer, and may
214 make such report to the appropriate law enforcement
215 authority.

216 [11.] 21. Within thirty days of an oral report of abuse
217 or neglect [from the division], the local office shall [file
218 a written report with] update the information in the
219 [central registry on forms supplied by the division for
220 that purpose] information system. The [report]
221 information system shall contain, at a minimum, the
222 [facts ascertained, a description of the services offered
223 and accepted, those responsible for the care of the subject
224 child, and other relevant dispositional information. The

225 written report shall be updated at regular intervals for
226 as long as the subject child or his family, or both, are
227 receiving services.] determination made by the
228 division as a result of the investigation or family
229 assessment and services approach, identifying
230 information on the subjects of the report, those
231 responsible for the care of the subject child and
232 other relevant dispositional information. The
233 division shall complete all investigations or family
234 assessments within thirty days, unless good cause
235 for the failure to complete the investigation or
236 assessment is documented in the information
237 system. If the investigation or family assessment
238 is not completed within thirty days the information
239 base shall be updated at regular intervals and upon
240 the completion of the investigation. The informa-
241 tion in the information system shall be updated to
242 reflect any subsequent findings, including any
243 changes to the findings based on an administrative
244 or judicial hearing on the matter.

245 22. The division shall maintain a record which
246 contains the facts ascertained which support the
247 determination as well as the facts that do not
248 support the determination.

249 [12.] 23. A person required to report under section
250 210.115 to the division shall be informed by the division
251 of his right to obtain information concerning the
252 disposition of his report. Such person shall receive, from
253 the local office, if requested, information on the general
254 disposition of his report. The local office shall respond
255 to the request within forty-five days.

256 [13.] 24. In any judicial proceeding involving the
257 custody of a child the fact that a report may have been

258 made [pursuant to sections 210.110 to 210.165] shall not
259 be admissible. However, nothing in this subsection shall
260 prohibit the introduction of evidence from independent
261 sources to support the allegations that may have caused
262 a report to have been made.

263 [14.] 25. The division shall promulgate rules and
264 regulations governing the operation of the central
265 registry, except as otherwise provided for in sections
266 [210.110 to 210.165] 210.109 to 210.183.

267 [15. No rule or portion of a rule promulgated under
268 the authority of this chapter shall become effective until
269 it has been approved by the joint committee on
270 administrative rules in accordance with the procedures
271 provided herein, and the delegation of the legislative
272 authority to enact law by the adoption of such rules is
273 dependent upon the power of the joint committee on
274 administrative rules to review and suspend rules pending
275 ratification by the senate and the house of representatives
276 as provided herein.

277 16. Upon filing any proposed rule with the secretary
278 of state, the filing agency shall concurrently submit such
279 proposed rule to the committee, which may hold hearings
280 upon any proposed rule or portion thereof at any time.

281 17. A final order of rulemaking shall not be filed with
282 the secretary of state until thirty days after such final
283 order of rulemaking has been received by the committee.

284 The committee may hold one or more hearings upon such
285 final order of rulemaking during the thirty-day period.
286 If the committee does not disapprove such order of
287 rulemaking within the thirty-day period, the filing
288 agency may file such order of rulemaking with the
289 secretary of state and the order of rulemaking shall be
290 deemed approved.

291 18. The committee may, by majority vote of the
292 members, suspend the order of rulemaking or portion
293 thereof by action taken prior to the filing of the final
294 order of rulemaking only for one or more of the following
295 grounds:

296 (1) An absence of statutory authority for the
297 proposed rule;

298 (2) An emergency relating to public health, safety
299 or welfare;

300 (3) The proposed rule is in conflict with state law;

301 (4) A substantial change in circumstance since
302 enactment of the law upon which the proposed rule is
303 based.

304 19. If the committee disapproves any rule or portion
305 thereof, the filing agency shall not file such disapproved
306 portion of any rule with the secretary of state and the
307 secretary of state shall not publish in the Missouri
308 Register any final order of rulemaking containing the
309 disapproved portion.

310 20. If the committee disapproves any rule or portion
311 thereof, the committee shall report its findings to the
312 senate and the house of representatives. No rule or portion
313 thereof disapproved by the committee shall take effect
314 so long as the senate and the house of representatives
315 ratify the act of the joint committee by resolution adopted
316 in each house within thirty legislative days after such
317 rule or portion thereof has been disapproved by the joint
318 committee.

319 21. Upon adoption of a rule as provided herein, any
320 such rule or portion thereof may be suspended or revoked
321 by the general assembly either by bill or, pursuant to
322 section 8, article IV of the constitution, by concurrent
323 resolution upon recommendation of the joint committee

324 on administrative rules. The committee shall be author-
325 ized to hold hearings and make recommendations
326 pursuant to the provisions of section 536.037, RSMo. The
327 secretary of state shall publish in the Missouri Register,
328 as soon as practicable, notice of the suspension or
329 revocation.]

210.150. 1. **The division of family services shall**
2 **ensure the confidentiality of all reports and records**
3 **made pursuant to sections 210.110 to 210.165 and**
4 **maintained by the division, its local offices, the central**
5 **registry, and other appropriate persons, officials, and**
6 **institutions pursuant to sections 210.110 to 210.165. [shall**
7 **be confidential. For the purpose of this section, "subjects"**
8 **include the child and any parent, guardian, or other**
9 **person responsible for the child, who is mentioned in a**
10 **report. "Reporters" include all persons and institutions**
11 **who report abuse or neglect pursuant to sections 210.110**
12 **to 210.165. Information shall not be made available to**
13 **any individual or institution except to:] To protect the**
14 **rights of the child named in the report as a victim,**
15 **the division of family services shall establish**
16 **guidelines, which shall ensure that any disclosure**
17 **of information concerning the abuse and neglect**
18 **involving that child is made only to persons or**
19 **agencies that have a right to such information.**

20 **2. Only the following persons may have access**
21 **to investigation records in which abuse or neglect**
22 **was substantiated by court adjudication or the**
23 **person has pled guilty or has been found guilty of**
24 **a crime where the victim of the crime was a child,**
25 **and records in which the division found credible**
26 **evidence to believe that abuse or neglect had**
27 **occurred:**

28 **(1) Appropriate federal, state or local criminal**
29 **justice agencies, or any agent of such entity, with**
30 **a need for such information under the law to**
31 **protect children from abuse or neglect;**

32 **[(1)] (2) A physician or [his designee] or a desig-**
33 **nated agent who [has before him a child who he]**
34 **reasonably believes that the child being examined**
35 **may be abused or neglected;**

36 **[(2)] (3) Appropriate staff of the division and of its**
37 **local offices, including interdisciplinary teams which are**
38 **formed to assist the division in investigation, evaluation**
39 **and treatment of child abuse and neglect cases or a**
40 **multidisciplinary provider of professional treatment**
41 **services [under contract with the division] for a child**
42 **referred to the provider;**

43 **[(3)] (4) Any [person who is the subject of a report]**
44 **child named in the report as a victim, or [his designee]**
45 **a legal representative, or the parent or guardian of**
46 **such person when [he] such person is a minor, or [who]**
47 **is mentally ill or otherwise [incompetent] incapacitated,**
48 **but the names of reporters shall not be furnished to**
49 **persons in this category. The division shall provide a**
50 **method for confirming or certifying that a designee is**
51 **acting on behalf of a subject;**

52 **(5) Any alleged perpetrator named in the**
53 **report or the designee of the alleged perpetrator;**

54 **[(4)] (6) A grand jury, juvenile officer, prosecuting**
55 **attorney, law enforcement officer involved in the**
56 **investigation of child abuse or neglect, juvenile court or**
57 **other court conducting abuse or neglect or child protective**
58 **proceedings, and other federal, state and local**
59 **government entities, or any agent of such entity,**
60 **with a need for such information in order to carry**

61 out its responsibilities under the law to protect
62 children from abuse or neglect;

63 [(5)] (7) Any person engaged in a bona fide research
64 purpose, with the permission of the director; provided,
65 however, that no information identifying the [subjects
66 of the reports and] child named in the report as a
67 victim or the reporters shall be made available to the
68 researcher, unless the identifying information is
69 essential to the research or evaluation and the
70 child named in the report as a victim or, if a minor,
71 through the child's parent, or guardian provides
72 written permission;

73 [(6)] (8) Any [day] child care home; [day] child care
74 center; child placing agency; residential care facility,
75 including group homes; juvenile courts; public or private
76 elementary schools; public or private secondary schools;
77 or any other public or private agency exercising
78 temporary supervision over a child or providing or having
79 care or custody of a child who may request an exam-
80 ination of the central registry from the division for all
81 employees and volunteers or prospective employees and
82 volunteers, who do or will provide services or care to
83 children. Any agency recognized by the division of
84 family services or business which provides train-
85 ing and places or recommends people for employ-
86 ment or for volunteers in positions where they will
87 provide services or care to children may request
88 the division to provide an examination of the
89 central registry. Such agency shall provide veri-
90 fication of its status as a recognized agency.
91 Requests for examinations shall be made to the division
92 director or [his] the director's designee in writing by
93 the chief administrative officer of the above homes,

94 centers, public and private elementary schools, public
95 and private secondary schools; agencies, or courts. The
96 division shall respond in writing to that officer. The
97 response shall include information pertaining to the
98 nature and disposition of any report or reports of abuse
99 or neglect revealed by the examination of the central
100 registry. This response shall not include any identifying
101 information regarding any person other than the alleged
102 perpetrator of the abuse or neglect;

103 [(7)] (9) Any person who inquires about a child abuse
104 or neglect report involving a specific [day] child care
105 home, [day] child care center, licensed child placing
106 agency, licensed residential care facility, public and
107 private elementary schools, public and private secondary
108 schools, juvenile court or other state agency. The
109 information available to these persons is limited to the
110 nature and disposition of any [substantiated] report
111 contained in the central registry and shall not include
112 any identifying information pertaining to any person
113 mentioned in the report;

114 [(8)] (10) Any state agency [when that agency is]
115 acting pursuant to statutes regarding a license of any
116 person, institution, or agency which provides care for
117 or services to children;

118 [(9)] (11) Any child death review team established
119 pursuant to section 210.192 or any state child death
120 review team established pursuant to section 210.195.

121 3. Only the following persons may have access
122 to records maintained by the division pursuant to
123 section 210.152 for which the division has received
124 a report of child abuse and neglect and which the
125 division has determined that there is insufficient
126 evidence or in which the division proceeded with

127 the family assessment and services approach:

128 (1) Appropriate staff of the division;

129 (2) Any child named in the report as a victim,
130 or a legal representative, or the parent or guardian
131 of such person when such person is a minor, or
132 is mentally ill or otherwise incapacitated. The
133 names or other identifying information of repor-
134 ters shall not be furnished to persons in this
135 category. The division shall provide for a method
136 for confirming or certifying that a designee is
137 acting on behalf of a subject;

138 (3) Any alleged perpetrator named in the
139 report. However, the records shall not be released
140 to any alleged perpetrator with pending criminal
141 charges arising out of the facts and circumstances
142 named in the report;

143 (4) Any child death review team established
144 pursuant to section 210.192 or any state child death
145 review team established pursuant to section
146 210.195;

147 (5) Appropriate criminal justice agencies or
148 juvenile officer;

149 (6) Upon order of the court;

150 (7) Multidisciplinary agency or individual
151 including a physician or physician's designee who
152 is providing services to the child or family, with
153 the consent of the parent or caretaker;

154 (8) Any person engaged in bona fide research
155 purpose, with the permission of the director;
156 provided, however, that no information identify-
157 ing the subjects of the reports or the reporters shall
158 be made available to the researcher, unless the
159 identifying information is essential to the research

160 or evaluation and the subject, or if a child, through
161 the child's parent or guardian, provides written
162 permission.

163 4. After a period of not less than one year
164 following a finding by the division, any person who
165 is the subject of a report where there is insufficient
166 evidence of abuse or neglect, may petition the
167 circuit court of the county where the person resides
168 and in circuits with split venue in the venue in
169 which the alleged perpetrator resides. If the
170 alleged perpetrator is not a resident of the state,
171 proper venue shall be in Cole County, naming the
172 division of family services as respondent, to order
173 the records removed from the division and
174 destroyed;

175 [2.] 5. Any person who knowingly violates the
176 provisions of this section, or who permits or encourages
177 the unauthorized dissemination of information contained
178 in the information system or the central registry and
179 in reports and records made pursuant to sections 210.110
180 to 210.165, shall be guilty of a class A misdemeanor.

210.152. 1. All identifying information, including
2 telephone reports reported pursuant to section 210.145,
3 relating to reports of abuse or neglect received by the
4 division shall be retained by the division and removed
5 from the records of the division as follows:

6 (1) For investigation reports in which abuse or
7 neglect is substantiated by court adjudication or the
8 person has pled guilty or has been found guilty of
9 a crime where the victim of the crime was a child,
10 identifying information shall be [available to individuals
11 or institutions listed in section 210.150 for ten years from
12 the date of the report or from the substantiation of the

13 abuse or neglect by a court of competent jurisdiction,
 14 whichever is later. At the end of such period, the
 15 identifying information shall be released only to
 16 appropriate criminal justice agencies and child death
 17 review teams] retained by the division;

18 (2) For investigation reports in which there is
 19 [reason to suspect] credible evidence to believe abuse
 20 or neglect to exist in the judgment of the division, or
 21 in which a child is at risk of abuse or neglect in the
 22 judgment of the division, identifying information shall
 23 be retained [for ten years from the date of the report or
 24 from the date of the closing of a case opened by the
 25 division in response to the report, whichever is later. At
 26 the end of such period, the identifying information shall
 27 be removed from the records of the division] by the
 28 division[. Information which is retained pursuant to this
 29 subdivision because of mere suspicion by the division
 30 shall be treated as confidential pursuant to section
 31 210.150 and shall be released only to individuals or
 32 institutions listed in section 210.150];

33 (3) For investigation reports [in which no] where
 34 insufficient evidence of abuse or neglect is found by
 35 the division, identifying information shall be retained
 36 for five years from the date of the report or from the
 37 date of the closing of a case opened by the division in
 38 response to the report or from the date of the last
 39 report if there were subsequent reports, whichever
 40 is later. Such report shall include any exculpatory
 41 evidence known by the division, including exculpatory
 42 evidence obtained after the closing of the case. [No
 43 information which is retained pursuant to this subdivi-
 44 sion shall be released to any individual or institution,
 45 except appropriate criminal justice agencies and child

46 death review teams.] At the end of such five-year period,
 47 the identifying information shall be removed from the
 48 records of the division and destroyed[. After a period of
 49 not less than one year following a finding by the division,
 50 any person who is the subject of a report where no
 51 evidence of abuse or neglect was found, may petition the
 52 circuit court of the county where the person resides,
 53 naming the division of family services as respondent,
 54 to order the records removed from the division and
 55 destroyed];

56 (4) For reports where the division uses the
 57 family assessment and services approach, identi-
 58 fying information shall be retained by the division;

59 [(4)] (5) For reports in which the division is unable
 60 to locate the child alleged to have been abused or
 61 neglected, identifying information shall be retained for
 62 ten years from the date of the report and then shall be
 63 removed from the records of the division.

64 2. Within ninety days after receipt of a report of
 65 abuse or neglect that is investigated, the [suspected]
 66 alleged perpetrator named in the report and the parents
 67 of the child named in the report, if the [suspected] alleged
 68 perpetrator is not a parent, shall be notified in writing
 69 of the division's determination based on the investiga-
 70 tion. [The notice shall advise either:

71 (1) That the division has determined that there is
 72 reason to suspect abuse or neglect exists or that there
 73 is reason to suspect that the child is at risk of abuse
 74 or neglect, and that the division shall retain all
 75 identifying information regarding the abuse or neglect
 76 for a period of ten years; that such information shall
 77 remain confidential and will not be released except to
 78 law enforcement agencies, prosecuting or circuit attor-

79 neys, or as provided in section 210.150; that the suspected
 80 perpetrator has thirty days from the date of receipt of
 81 the notice to seek reversal of the division's determination
 82 by a court appeal as provided in subsection 3 of this
 83 section;

84 (2) There is no evidence to substantiate abuse or
 85 neglect.]

86 3. Any person named [as a suspected] in an
 87 investigation as perpetrator who is aggrieved by [any
 88 decision of] a determination of abuse or neglect by
 89 the division as provided in this section may seek [judicial]
 90 an administrative review [in the circuit court in the
 91 county in which the alleged perpetrator resides. If the
 92 alleged perpetrator is not a resident of the state, venue
 93 shall be proper in the county in which the alleged victim
 94 resides or the county in which the alleged abuse or neglect
 95 occurred] by the child abuse and neglect review
 96 board pursuant to the provisions of section
 97 210.153, RSMo. Such request for review shall be made
 98 within [thirty] sixty days of notification of the division's
 99 decision under this section. [The court may accept an
 100 appeal up to twenty-four months after the party filing
 101 the appeal received notice of the division's decision, upon
 102 a showing that:

103 (1) Good cause exists for the untimely commence-
 104 ment of the request for the review;

105 (2) If the opportunity to appeal is not granted it will
 106 adversely affect the party's opportunity for employment;
 107 and

108 (3) There is no other adequate remedy at law.]

109 4. In any such action for [judicial] administrative
 110 review, the [court] child abuse and neglect review
 111 board shall sustain the division's determination if such

112 determination is supported by [competent and substan-
 113 tial evidence] credible evidence [and is not against the
 114 weight of such evidence]. [At the request of any party
 115 to the action, the court shall order the record of the
 116 proceeding to be closed.] The child abuse and neglect
 117 review board hearing shall be closed to all persons
 118 except the parties, their attorneys and those
 119 persons providing testimony on behalf of the
 120 parties.

121 5. If the alleged perpetrator is aggrieved by the
 122 decision of the [circuit court he] child abuse and neglect
 123 review board, the alleged perpetrator may seek de
 124 novo judicial review in [another division of the circuit
 125 court but no further appeal shall be available.] the
 126 circuit court in the county in which the alleged
 127 perpetrator resides and in circuits with split venue
 128 in the venue in which the alleged perpetrator
 129 resides, or in Cole County. If the alleged perpe-
 130 trator is not a resident of the state, proper venue
 131 shall be in Cole County. The request for a judicial
 132 review shall be made within thirty days of the
 133 notification of the finding of the child abuse and
 134 neglect review board decision.

135 6. In any such action for administrative review
 136 the child abuse and neglect review board shall
 137 notify the child or the parent, guardian or legal
 138 representative of the child, that a review has been
 139 requested.

210.153. 1. There is hereby created in the
 2 department of social services, the "Child Abuse
 3 and Neglect Review Board" which shall provide
 4 an independent review of child abuse and neglect
 5 determinations in instances in which the alleged

6 perpetrator is aggrieved by the decision of the
 7 division of family services. The division may
 8 establish more than one board to assure timely
 9 review of the determination.

10 2. The board shall consist of nine members who
 11 shall be appointed by the governor with the advice
 12 and consent of the senate, and shall include:

13 (1) A physician, nurse or other medical
 14 professional;

15 (2) A licensed child or family psychologist,
 16 counselor or social worker;

17 (3) An attorney who has acted as a guardian
 18 ad litem or other attorney who has represented
 19 a subject of a child abuse and neglect report;

20 (4) A representative from law enforcement or
 21 a juvenile office.

22 3. Other members of the board may be selected
 23 from:

24 (1) A person from another profession or field
 25 who has an interest in child abuse or neglect;

26 (2) A college or university professor or elemen-
 27 tary or secondary teacher;

28 (3) A child advocate;
 29 (4) A parent or foster parent.

30 4. The following persons may participate in a
 31 child abuse and neglect review board review:

32 (1) Appropriate division of family services
 33 staff and legal counsel for the department;

34 (2) The alleged perpetrator, who may be
 35 represented pro se or be represented by legal
 36 counsel. The alleged perpetrator's presence is not
 37 required for the review to be conducted. The
 38 alleged perpetrator may submit a written state-

39 ment for the board's consideration in lieu of
 40 personal appearance; and

41 (3) Witnesses providing information on behalf
 42 of the child, the alleged perpetrator or the depart-
 43 ment. Witnesses shall only be allowed to attend
 44 that portion of the review in which they are
 45 presenting information.

46 5. The members of the board shall serve
 47 without compensation, but shall receive
 48 reimbursement for reasonable and necessary
 49 expenses actually incurred in the performance of
 50 their duties.

51 6. All records and information compiled,
 52 obtained, prepared or maintained by the child
 53 abuse and neglect review board in the course of
 54 any review shall be confidential information.

55 7. The department shall promulgate rules and
 56 regulations governing the operation of the child
 57 abuse and neglect review board except as other-
 58 wise provided for in this section. These rules and
 59 regulations shall, at a minimum, describe the
 60 length of terms, the selection of the chairperson,
 61 confidentiality, notification of parties and time
 62 frames for the completion of the review.

63 8. Findings of credible evidence to suspect
 64 child abuse and neglect by the division which are
 65 substantiated by court adjudication shall not be
 66 heard by the child abuse and neglect review board.

67 The alleged perpetrator shall have sixty days from
 68 the date of court adjudication to appeal the
 69 division's finding to the appropriate court as
 70 specified in section 210.152.

210.166. [1. As used in this section, the following

2 terms mean:

3 (1) "Interested person", the division of family
4 services, any juvenile officer, any physician licensed
5 under chapter 334, RSMo, any hospital or other health
6 care institution, and any other person or institution
7 authorized by state or federal law to provide medical care;

8 (2) "Medical neglect", the denial or deprivation, by
9 those responsible for the care, custody, and control of
10 the minor, of medical or surgical treatment or interven-
11 tion which is necessary to remedy or ameliorate a life-
12 threatening medical condition;

13 (3) "Those responsible for the care, custody, and
14 control of the minor", includes, but is not limited to, the
15 parents or guardian of a minor, other members of the
16 minor's household, or those exercising supervision over
17 a minor for any part of a twenty-four-hour day.

18 2. Any interested person] **The division of family**
19 **services, any juvenile officer, any physician**
20 **licensed under chapter 334, RSMo, any hospital or**
21 **other health care institution, and any other person**
22 **or institution authorized by state or federal law**
23 **to provide medical care** may bring an action in the
24 circuit court in the county where any child under eighteen
25 years of age resides or is located, alleging the child is
26 suffering from [medical neglect.] **the denial or depri-**
27 **vation, by those responsible for the care, custody,**
28 **and control of the child, of medical or surgical**
29 **treatment or intervention which is necessary to**
30 **remedy or ameliorate a life-threatening medical**
31 **condition. Those responsible for the care, custody**
32 **and control of the child includes, but is not limited**
33 **to, the parents or guardian of the child, other**
34 **members of the child's household, or those exer-**

35 **cising supervision over a child for any part of a**
36 **twenty-four-hour day.** A petition filed under this
37 section shall be expedited by the court involved in every
38 manner practicable, including, but not limited to, giving
39 such petition priority over all other matters on the court's
40 docket and holding a hearing, at which the parent,
41 guardian or other person having authority to consent
42 to the medical care in question shall, after being notified
43 thereof, be given the opportunity to be heard, and issuing
44 a ruling as expeditiously as necessary when the child's
45 condition is subject to immediate deterioration.

210.180. Each employee of the division who is
2 responsible for the investigation **and family assess-**
3 **ment of reports of suspected child abuse or neglect** shall
4 receive not less than forty hours of preservice training
5 on the identification and treatment of child abuse and
6 neglect. In addition to such preservice training such
7 employee shall also receive not less than twenty hours
8 of inservice training each year on the subject of the
9 identification and treatment of child abuse and neglect.
10 [Such training shall be prepared and offered by the
11 division in cooperation with an institution of higher
12 learning in this state which offers an accredited social
13 work program.]

210.183. 1. At the time of the initial investigation
2 of a report of child abuse or neglect, the division employee
3 conducting the investigation shall provide the alleged
4 perpetrator with a written description of the investigation
5 process. Such written notice shall be given substantially
6 in the following form:

7 "The investigation is being undertaken by the
8 Division of Family Services pursuant to the requirements
9 of chapter 210 of the Revised Missouri Statutes in

10 response to a report of child abuse or neglect [which was
 11 made to the central registry].

12 The identity of the person who reported the incident
 13 of abuse or neglect is confidential and may not even be
 14 known to the Division since the report could have been
 15 made anonymously.

16 This investigation is required by law to be conducted
 17 in order to enable the Division of Family Services to
 18 identify incidents of abuse or neglect in order to provide
 19 protective or preventive social services to families who
 20 are in need of such services. [While the primary purpose
 21 of this investigation is not to look for evidence of a crime,
 22 the investigation could result in criminal prosecution and
 23 punishment.]

24 The division shall make every reasonable
 25 attempt to complete the investigation [will be
 26 completed] within thirty days. Within ninety days you
 27 will receive a letter from the Division which will inform
 28 you of [one of the following]:

29 (1) That the Division has found no evidence of abuse
 30 or neglect and that the report and all identifying
 31 information regarding the report have been removed from
 32 the records of the agency; or

33 (2) That there appears to be reason to suspect the
 34 existence of child abuse or neglect in the judgment of
 35 the Division and that the Division plans to offer the
 36 following services (here insert brief service plan) the
 37 results of their investigation.

38 If the Division finds there is [reason to suspect]
 39 credible evidence to believe child abuse or neglect
 40 has occurred or the case is substantiated by court
 41 adjudication, a record of the report and information
 42 gathered during the investigation will remain on file with

43 the Division [for ten years] for a period of time
 44 specified in section 210.152.

45 If you disagree with the determination of the Division
 46 and feel that there is [no reason] insufficient credible
 47 evidence to [suspect] believe abuse or neglect has
 48 occurred, you have a right to [consult with an attorney
 49 of your choice and] request [a hearing] an administra-
 50 tive review at which time you may hire an attorney
 51 to represent you. If you request [a hearing] an
 52 administrative review on the issue, [a judge will decide
 53 whether there are reasonable grounds to suspect that
 54 abuse or neglect has occurred or whether the Division
 55 has made an error] you will be notified of the date
 56 and time of your administrative review hearing by
 57 the child abuse and neglect review board. If [a judge
 58 decides that the Division made an error in the determi-
 59 nation] the division's decision is reversed by the
 60 child abuse and neglect review board, the Division
 61 records concerning the report and investigation will be
 62 [destroyed.] updated to reflect such finding. If the
 63 child abuse and neglect review board upholds the
 64 division's decision, an appeal may be filed in circuit
 65 court, within thirty days of the child abuse and
 66 neglect review board's decision."

67 2. If the division uses the family assessment
 68 approach, the division shall at the time of the initial
 69 contact provide the parent of the child with the
 70 following information:

71 (1) The purpose of the contact with the family;
 72 (2) The name of the person responding and
 73 their office telephone number;
 74 (3) The assessment process to be followed
 75 during the division's intervention with the family

76 including the possible services available and
 77 expectations of the family.

211.180. Family preservation screenings shall
 2 be conducted by the division of family services
 3 within seventy-two hours of the removal of a child
 4 from the home and placement in the custody of the
 5 court. The results of this screening shall be
 6 submitted to the juvenile court judge for consid-
 7 eration in the order of disposition or treatment of
 8 the child.

590.105. 1. A program of mandatory standards for
 2 the basic training and certification of peace officers and
 3 a program of optional standards for the basic training
 4 and certification of reserve officers in this state is hereby
 5 established. The peace officer standards and training
 6 commission shall establish the minimum number of
 7 hours of training and core curriculum. In no event,
 8 however, shall the commission require more than one
 9 thousand hours of such training for either peace or
 10 reserve officers employed by any state law enforcement
 11 agency, or more than six hundred hours of such training
 12 for other peace or reserve officers; provided, however, that
 13 the minimum hours of training shall be no lower than
 14 the following:

15 (1) One hundred twenty hours as of August 28, 1993;
 16 (2) Three hundred hours as of August 28, 1994; and
 17 (3) Four hundred fifty hours as of August 28, 1996.
 18 The higher standards provided in this section for
 19 certification after August 28, 1993, shall not apply to any
 20 peace or reserve officer appointed or certified prior to
 21 August 28, 1993. Peace and reserve officers appointed
 22 between August 28, 1993, and August 28, 1996, shall only
 23 meet the hours of training applicable to the year in which

24 the officer was appointed. Beginning on August 28, 1996,
 25 peace and reserve officers shall be required to complete
 26 the four hundred fifty hours of training as peace officers
 27 and be certified to be eligible for employment. Park
 28 rangers appointed pursuant to section 64.335, RSMo, who
 29 do not carry firearms shall be exempt from the training
 30 requirements of this section. Peace officers employed as
 31 full-time bailiffs and who are commissioned peace officers
 32 shall be required to complete a minimum of sixty hours
 33 of the training requirements prescribed by this section.

34 2. The training and core curriculum established
 35 by the officer standards and training commission
 36 shall include thirty hours of training on the
 37 investigation of domestic violence incidents. The
 38 training shall focus on the following:

39 (1) Physical abuse;
 40 (2) Sexual abuse;
 41 (3) Child fatalities;
 42 (4) Legal mandates of the various state agen-
 43 cies involved in child abuse and neglect cases;
 44 (5) Agency coordination and responsibilities;
 45 (6) Interviewing children and alleged
 46 perpetrators;
 47 (7) Prosecution and juvenile court cases; and
 48 (8) Alternative outcomes.

49 3. All political subdivisions within this state may
 50 adopt standards which are higher than the minimum
 51 standards implemented pursuant to sections 590.100 to
 52 590.180, and such minimum standards shall in no way
 53 be deemed adequate in those cases in which higher
 54 standards have been adopted.

55 [3.] 4. Any federal officer who has the duty and
 56 power of arrest on any federal military installation in

57 this state may, at the option of the federal military
 58 installation in which the officer is employed, participate
 59 in the training program required under the provisions
 60 of sections 590.100 to 590.180 and, upon satisfactory
 61 completion of such training program, shall be certified
 62 by the director in the same manner provided for peace
 63 officers, as defined in section 590.100, except that the
 64 duty and power of arrest of military officers for violation
 65 of the general criminal laws of the state or for violation
 66 of ordinances of counties or municipalities of the state
 67 shall extend only to the geographical boundaries within
 68 which the federal military installation is located. Any
 69 costs involved in the training of a federal officer shall
 70 be borne by the participating federal military
 71 installation.

72 [4.] 5. Notwithstanding any provision of this
 73 chapter to the contrary, any peace officer who is employed
 74 by a law enforcement agency located within a county
 75 of the third classification shall be required to have no
 76 more or less than one hundred twenty hours of training
 77 for certification if the respective city or county adopts
 78 an order or ordinance to that effect.

79 [5.] 6. Any seminar, educational program, or school-
 80 ing received by a peace officer shall be credited toward
 81 the four hundred fifty hours of training required by this
 82 section.

8 [210.186. 1. The department of public safety
 2 shall establish and maintain a special unit which
 3 shall investigate allegations of improper behavior
 4 by division staff during investigations, evaluations
 5 or treatment of child abuse or neglect reports made
 6 pursuant to sections 210.110 to 210.165.

7 2. Any person who is contacted by the division
 8 during an investigation made pursuant to a report

9 of child abuse or neglect under the provisions of
 10 sections 210.110 to 210.165 shall be advised of the
 11 service provided by this section thirty days after
 12 the notice of the result of the investigation as
 13 required by section 210.152.

14 3. The special investigation unit established in
 15 this section shall investigate each complaint
 16 received within a reasonable time. The investigation
 17 shall include but shall not be limited to;

18 (1) Whether there is reason to suspect that
 19 improper behavior was exhibited by division
 20 personnel during investigations, evaluations or
 21 treatment of child abuse or neglect reports made
 22 pursuant to sections 210.110 to 210.165;

23 (2) Whether there is reason to suspect that
 24 division personnel failed to follow any prescribed
 25 statutes, rules, regulations or policies governing
 26 their conduct or actions during the course of their
 27 investigations, evaluations, or treatment of child
 28 abuse or neglect reports made pursuant to sections
 29 210.110 to 210.165;

30 (3) Whether the conduct, behavior, or actions
 31 of division personnel during the course of the
 32 investigation, evaluation, or treatment of child
 33 abuse or neglect reports made pursuant to sections
 34 210.110 to 210.165 exceeded their legal and ad-
 35 ministrative authority;

36 (4) Whether there is reason to suspect that the
 37 legal or constitutional rights of those investigated
 38 under sections 210.110 to 210.165 may have been
 39 violated.

40 4. The investigation of complaints under this
 41 section shall not include a review of the decision
 42 of the division on the allegation of child abuse or
 43 neglect. The investigation shall review only the
 44 actions of the division personnel during the course
 45 of an investigation, evaluation or treatment
 46 program under sections 210.110 to 210.165.

47 5. The special investigative unit established in
 48 this section shall maintain a log of complaints
 49 investigated pursuant to this section. A report of
 50 each complaint shall be made and shall include the
 51 nature of the complaint and the findings of an
 52 investigation undertaken pursuant to subsection 4
 53 of this section. A copy of the report shall be made
 54 available to the following persons:

55 (1) The county director of the division of family
 56 services office in whose jurisdiction the complaint
 57 was made;

58 (2) The division employee about whom the
 59 complaint was made;

60 (3) The director of the department of social
 61 services;

62 (4) The director of the division of family
 63 services;

64 (5) The representative and senator where the
 65 complainant resides; and

66 (6) The person who made the complaint. The
 67 number of complaints in and of itself shall not be
 68 a factor in merit ratings of an employee.

69 6. An annual summary of complaints shall be
 70 compiled and made available to the following
 71 persons:

72 (1) The director of the department of social
 73 services;

74 (2) The director of the division of family
 75 services;

76 (3) The governor;

77 (4) Members of the general assembly, upon
 78 request.

79 7. The provisions of this section shall expire
 80 December 31, 1989.]

2 [210.189. The director of the division of family
 3 services shall on January 15, 1988, report to the
 4 general assembly the conclusions of a study to be
 conducted by the division regarding the electronic

5 5 recording of telephone reports pursuant to section
 6 210.145. The study shall include, but is not limited
 7 to, the following: The impact of recording of the
 8 reports on the total number of reports made to the
 9 division under sections 210.110 to 210.165; whether
 10 the recording had a chilling effect on the number
 11 or type of calls made to the division; whether the
 12 recording helped to identify persons who made
 13 reports maliciously or for the purpose of harassment;
 14 and how the electronic recordings were used to
 15 prosecute persons who made such malicious or
 16 harassing reports.]

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